



APPLICATION YOUTH & FAMILY MINISTRY VOLUNTEER—CONFIDENTIAL

This form is to be completed by all persons who volunteer directly with minors in our church.

Personal Information

Name (Please Print)		Email
Address		Alternate Email
City, State, Zip	Day Phone	Cell Phone
Evening Phone	Date of Birth	Social Security Number

Unity Background & Volunteer Work Preferences

How long have you been attending our church?	Are you a member? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, date joined _____
What Unity classes have you taken?	What students do you prefer to work with? <input type="checkbox"/> Nursery <input type="checkbox"/> Preschool <input type="checkbox"/> K-2nd <input type="checkbox"/> 3rd-5th <input type="checkbox"/> Uniteen (6th-8th) <input type="checkbox"/> Y.O.U. (9th-12th) Why?
What role do you prefer? <input type="checkbox"/> Teacher/Sponsor <input type="checkbox"/> Classroom Assistant <input type="checkbox"/> Chaplaincy <input type="checkbox"/> Other _____	When are you available? Check one per column. <input type="checkbox"/> Sunday mornings <input type="checkbox"/> Weekly <input type="checkbox"/> Weekday <input type="checkbox"/> 2 Sundays per month <input type="checkbox"/> Other _____

Special Gifts

List passions, special skills and gifts, interests, hobbies. Also include languages spoken other than English.
What interests or motivates you most about serving in the Youth & Family Ministry department?