

Hope Street Ministry, Inc.



VOLUNTEER APPLICATION

This application is to be completed by all volunteer applicants desiring to serve at Hope Street Ministry, Inc. This application must be completed by the applicant and will be reviewed by Hope Street Ministry staff before the applicant will be approved for service with Hope Street Ministry members. This is not an employment application. Information disclosed on this application will be reviewed only by Hope Street Ministry staff.

Full Legal Name: _____

Male Female

Have you ever been known by a different name?

Yes No If yes, indicate name _____

Current Address: _____

Phone: _____ Email: _____

Date of Birth: _____

I have lived in the State of Wisconsin for 10 years:

Yes No If no, indicate where you've lived: _____

Where do you go to church?: _____

Other volunteer experience?: _____

Have you worked with kids before?

Yes No If yes, indicate when/where _____

Character Reference (Name and Number): _____

● We run a background check on all volunteers-please list all convictions below:

● Please indicate the days and times which you are available for volunteering your time at Hope Street.

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THIS PORTION WILL BE SIGNED AFTER THE APPLICATION HAS BEEN REVIEWED

As you consider becoming a volunteer of Hope Street there are three things that we deeply value and are committed to do; Cultivating hope, protecting from toxic elements, and growing together in a community with each other and Jesus. In order to become a volunteer of Hope Street we ask you to value and be committed to the same. Please initial next to each if you are:

- I am committed to cultivating hope in my own life and my community. _____
- I am committed to protecting myself and others from toxic behaviors. _____
- I am committed to growing together in this community through being present and building relationships. _____



Volunteer Signature: _____

Staff Signature: _____