

GOD'S HAVENS FOR CHILDREN

www.ghfci.org

Tel: (805)772-4004 or (888)556-4432

Volunteer Application

Please return to:

GHFC Recruitment Manager/Director
P.O. Box 13426
San Luis Obispo, CA 93406

Type of volunteer:

- Office & Administrative
- PR assistance
- Mentoring Program
- Other (specify) _____

Name: _____ Date of birth: _____

Address: _____ City: _____

State: _____ Zip: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

Message Phone: _____ E-mail address: _____

If married, name of spouse: _____ Number of children _____

Occupation: _____ Employer Phone: _____

Name of Employer: _____

Employer's address: _____

Educational background: _____

Special interests, hobbies, skills: _____

Foreign languages: _____

Name of church you attend (if applicable): _____

Pastor's or Religious Leader's Name: _____

Church or Religious Gathering Place Address and Phone #: _____

Please indicate your spiritual beliefs and background (if any): _____

Is there any other information related to your interests, background, education, training, experiences, skills, interests, etc. that may be relevant to a volunteer role with GHFC?

Do you have any specific questions regarding the GHFC organization that would like answered? _____

If necessary, please attach additional sheets.

When completed, please mail "**Volunteer Application**" to:

GHFC Recruitment Manager/Director
P.O. Box 13426
San Luis Obispo, CA 93406-3426

Have you ever worked with troubled or challenged children/youth before? Yes No

If yes, explain: _____

Can you make a one year commitment? Yes No If not, how long? _____

Have you ever been arrested? Yes No

Have you ever been convicted of a crime? Yes No

Have you served time? Yes No

Have you ever been reported or investigated concerning child abuse or neglect? Yes No

If yes, please explain: _____

Please list 3 references: Pastor or religious leader of your current church or place of worship, current or last employer, and close family member. Enclosed are three reference forms for you to give to these references. **Please fill out and sign the release at the top of each reference form.**

Pastor/Religious
Leader: _____ Phone: _____

Address: _____

Employer: _____ Phone: _____

Address: _____

Family: _____ Phone: _____

Address: _____

Comments: _____

Signature

Date

GOD'S HAVENS FOR CHILDREN VOLUNTEER PROGRAM
PO Box 13426 San Luis Obispo, CA 93406

Volunteer Recommendation: Family Reference

Applicant's name: _____

I hereby give permission to _____ to complete this recommendation form and I waive my right to review it after it is submitted.

Signed _____ Date _____

The above named person has applied for volunteer work with God's Havens for Children. The applicant has chosen you as a reference. Please complete this form to the best of your knowledge.

How long have you known the applicant? _____

In what capacity? _____

Does the applicant have a good home environment? _____

Does he/she work well with others? _____

Please comment on his/her level of commitment. _____

Does he/she have a tendency to over-commit him/herself? _____

How would you rate him/her according to the following criteria?

	Excellent	Good	Average	Poor	Unknown
Personal habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compassion for the needy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completes commitments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Christian maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receives constructive criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you were in our position, would you, without hesitation, consider this person to be a volunteer leader? Please explain. _____

Is there any reason why you would not recommend this applicant for working with a child? Please explain. _____

To your knowledge, has this person ever been arrested? Y / N Comment _____

To your knowledge, has this person ever been investigated for child abuse/endangerment? Y / N

Print name _____ Signature _____

Date _____ Work phone _____ Home phone _____

Please use the back of this form if necessary. **Your immediate response is appreciated.**

GOD'S HAVENS FOR CHILDREN VOLUNTEER PROGRAM
PO Box 13426 San Luis Obispo, CA 93406

Volunteer Recommendation: Employer Reference

Applicant's name: _____

I hereby give permission to _____ to complete this recommendation form and I waive my right to review it after it is submitted.

Signed _____ Date _____

The above named person has applied for volunteer work with GOD'S HAVENS FOR CHILDREN. The applicant has chosen you as a reference. Please complete this form to the best of your knowledge.

How long have you known the applicant? _____

In what capacity? _____

Does the applicant have a good home environment? _____

Does he/she work well with others? _____

Please comment on his/her level of commitment. _____

Does he/she have a tendency to over-commit him/herself? _____

How would you rate him/her according to the following criteria?

	Excellent	Good	Average	Poor	Unknown
Personal habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compassion for the needy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completes commitments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Christian maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receives constructive criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you were in our position, would you, without hesitation, consider this person to be a volunteer leader with incarcerated teenagers? Please explain. _____

Is there any reason why you would not recommend this applicant for working with a child? Please explain. _____

To your knowledge, has this person ever been arrested? Y / N Comment _____

To your knowledge, has this person ever been investigated for child abuse/endangerment? Y / N

Print name _____ Signature _____

Date _____ Work phone _____ Home phone _____

Please use the back of this form if necessary. **Your immediate response is appreciated.**

GOD'S HAVENS FOR CHILDREN VOLUNTEER PROGRAM
PO Box 13426 San Luis Obispo, CA 93406

Volunteer Recommendation: Pastor Reference

Applicant's name: _____

I hereby give permission to _____ to complete this recommendation form and I waive my right to review it after it is submitted.

Signed _____ Date _____

Dear Pastor: The above named person has applied for volunteer work with GOD'S HAVENS FOR CHILDREN.. The applicant has chosen you as a reference. Please complete this form to the best of your knowledge.

How long have you known the applicant? _____

In what capacity? _____

Does the applicant have a good home environment? _____

Does he/she work well with others? _____

Please comment on his/her level of commitment. _____

Does he/she have a tendency to over-commit him/herself? _____

How would you rate him/her according to the following criteria?

	Excellent	Good	Average	Poor	Unknown
Personal habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compassion for the needy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completes commitments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Christian maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receives constructive criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you were in our position, would you, without hesitation, consider this person to be a volunteer leader with incarcerated teenagers? Please explain. _____

Is there any reason why you would not recommend this applicant for working with a child? Please explain. _____

To your knowledge, has this person ever been arrested? Y / N Comment _____

To your knowledge, has this person ever been investigated for child abuse/endangerment? Y / N

Print name _____ Signature _____

Date _____ Work phone _____ Home phone _____

Please use the back of this form if necessary. **Your immediate response is appreciated.**