Parkview Baptist Church Volunteer Application

Name		,			
Last	First	Tãaå ^	^		
Address			 ZÓÚ		
Street	City				
Home Phone	Work				
Cell Phone	E-mail	.,,,			
Best time to be contacted					
Number of hours available per	week Prefer:	AM PM			
Best Day(s) to serve: Mon	Tues Wed Thurs	Fri Sat Sun			
Position applying for		.,,,,			
Present church member	YesNo	In membership prod	cess		
Church positions held in the pa	st		•		
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Where employed		Full-time / Par	t-time		
What skills, spiritual gifts, or tale	ents do you have which m	ight be useful in this po	sition?		

What training or experiences do you have which might be useful in this position?

If you could do anything for God without fear of failure, what would it be?

•	n convicted of a ase explain below		se?	Yes	No	
	n convicted of chesting or abusing					in any activities
What moving	violations are on	your driving re	ecord? I	Please lis	t and explai	1 .
References: • `] ^ çã[D	(Please provide	name and pho	one of th	nree refer	ences, inclu	ding a former
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that any false	I information pro information or or my removal if dis	mission may di	squalify	me from		
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