

LifeBUILDERS Volunteer Application

Contact Information	
Full Legal Name	First: _____ Middle: _____
	Last: _____
	<input type="checkbox"/> No middle name to satisfy this requirement.
Other Names Used	List other names you may have been known as in the past, such as your maiden name. Continue using a separate sheet of paper if needed.
Date of Birth [mm/dd/yyyy]	
Social Security Number	
Ethnicity	
Gender	
Phone Number	<input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work
E-Mail Address	
Driver's License Number	State Issued _____
Current Address: Since [mm/dd/yyyy]	
Street	
City, State Zip	
Previous Address: From [mm/dd/yyyy]	
Street	
City, State Zip	
Previous Address: From [mm/dd/yyyy]	
Street	
City, State Zip	

How did you hear about LifeBUILDERS?

Interests	
Tell us in which areas you are interested in volunteering / skilled to volunteer:	
Youth Program	Administration
<input type="checkbox"/> Kids (K-5) Camp (Sat. morning)	<input type="checkbox"/> Accounting / Clerical
<input type="checkbox"/> Teen Girls Club (Mon. late afternoon)	<input type="checkbox"/> Deliveries / Transportation
<input type="checkbox"/> Teen Guys Club (Wed. evening)	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Summer Day Camp (three weeks in Summer)	Volunteer Coordination
Seniors Program	<input type="checkbox"/> Events / Event Coordinating
<input type="checkbox"/> Senior Citizens Club (1 Sat. morning / month)	<input type="checkbox"/> Volunteer Management
Community Service	Property Maintenance
<input type="checkbox"/> Radio Patrol	<input type="checkbox"/> Gardening
	<input type="checkbox"/> Handyman Repairs

Availability
When are you available to volunteer?
<input type="checkbox"/> Weekdays <input type="checkbox"/> Weekday evenings <input type="checkbox"/> Saturdays
You are looking to volunteer for an:
<input type="checkbox"/> Ongoing Program <input type="checkbox"/> One-time or Special Event

Experience, Special Skills or Qualifications
Summarize your previous volunteer experience.
Summarize special skills and qualifications you have acquired from employment, previous volunteer work or through other activities, including hobbies or sports.

Health Concerns (that would affect your ability to volunteer)

Person to Notify in Case of Emergency	
Name	
Relationship	
Phone	

Statement of Faith

At LifeBUILDERS we believe everyone is in process with the Lord. Our understanding of God is one of those areas we are continually growing in. We are interested in where you are in your journey.

Please read the following beliefs about God which LifeBUILDERS affirms and share if these beliefs are consistent with your own beliefs and which, if any, of these beliefs you remain unsure about and why. Answering "No" to the question below does not preclude you from volunteering with LifeBUILDERS

- We believe the entire Bible is the inspired Word of God and that men were moved by the Spirit of God to write the very words of Scripture. Therefore, we believe the Bible is without error in its original manuscripts.
- We believe there is one God, eternally existent in three persons: Father, Son, Holy Spirit.
- We believe Jesus is Lord, He was born of a virgin, He lived a sinless life; He died to redeem us from sin; He was truly resurrected, He ascended to heaven, and He will return in power and glory.
- We believe in the personality and deity of the Holy Spirit, that the Holy Spirit indwells all believers in Christ, and that the Spirit gives life, sanctifies, empowers and comforts all believers.

Are the beliefs stated above consistent with your own beliefs? Yes No

If you answered "No", which of these beliefs are you unsure about? Why so?

Spiritual Journey

How and when did you come to know Christ? Outline the beginning of your Christian faith.

Describe recent areas of recognized growth in your Christian life.

Have you ever led anyone to Christ, or discipled someone so they grew in their walk with God? Explain how it happened most recently.

In what discipleship programs, mentoring relationships or youth ministries have you participated?

What decisions have you made and boundaries you have set in order to honor God and live a life above reproach?

How were you led to volunteering with LifeBUILDERS? What is motivating your desire to serve with us?

Background Questions

Keep in mind that your proposed service may involve access to minor children, is there anything in your personal history or experience that indicates that you have any problem whatsoever involving sexual attraction to children or any related tendencies that could pose a risk bearing of harm to any children you may encounter during your service?

Yes No

If yes, please explain.

Have you ever been the subject of a complaint of child abuse or any other type of mistreatment of children?

Yes No

If yes, please explain.

Has anyone ever complained to you, the organization you were serving with, or to the government concerning your care of children?

Yes No

If yes, please explain.

Certain types of behavior may reflect negatively on your fitness to serve in this ministry. Have you ever been charged with or convicted of any crime or misdemeanor involving (1) a minor child, (2) stalking or harassment, (3) sex or lewd behavior (e.g., rape, sexual assault, prostitution, public indecency) or (4) violence against another person?

Yes No

If yes, please explain.

Have you engaged in any illegal drug use within the past 10 years?

Yes No

If yes, please explain.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Full Legal Name (printed)

Signature

Date

Volunteer Release and Waiver of Liability

I, _____, the volunteer, hereby freely and voluntarily, without duress, execute this Release and Waiver of Liability (the "Release") on _____.

I, the volunteer, desire to participate in LifeBUILDERS, a nonprofit corporation organized and existing under the laws of the State of Michigan, its directors, officers, employees, and agents (collectively, "LifeBUILDERS"), activities. I understand that the activities may include but are not limited to construction and rehabilitation of residential structures, being transported to and from event site locations, consuming food, and other participatory related activities.

1. Waiver and Release. I, the volunteer, release and forever discharge and hold harmless LifeBUILDERS and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my participation with LifeBUILDERS. I understand and acknowledge that this Release will discharge LifeBUILDERS from any liability or claim that I, the volunteer, may have against LifeBUILDERS with respect to any bodily injury, personal injury, illness, death, or property damage that may result from my participation with any events of LifeBUILDERS. I, the volunteer, also understand that LifeBUILDERS does not assume any responsibility for or obligation to provide monetary assistance or other assistance, including but not limited to medical, health, or disability insurance, in the event of injury, illness, death, or property damage.

2. Insurance. EACH PARTICIPANT IS EXPECTED AND ENCOURAGED TO ARRIVE WITH MEDICAL OR HEALTH INSURANCE AND COVERAGE IN EFFECT.

3. Medical Treatment. Except as otherwise agreed to by LifeBUILDERS in writing, I hereby release and forever discharge LifeBUILDERS from any claim whatsoever that arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my time as a volunteer with LifeBUILDERS.

4. Assumption of the Risk. I understand that my time with LifeBUILDERS may include activities that may be hazardous to me, including, but not limited to, construction activities, loading and unloading of heavy equipment and materials, painting, and local transportation to and from the event sites. So, I recognize and understand that my time with LifeBUILDERS may, in some situations, involve inherently dangerous activities. I hereby expressly and specifically assume the risk of injury or harm in these activities and do release LifeBUILDERS from all liability for injury, illness, death, or property damage resulting from the activities of my time with them.

5. Photographic Release. I grant LifeBUILDERS all right, title, and interest in any and all photographic images and video or audio recordings made by LifeBUILDERS during my volunteer time, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings. LifeBUILDERS reserves the right to use any photograph/video taken at any event or activity sponsored by LifeBUILDERS, without the expressed written permission of those included within the photograph/video. LifeBUILDERS may use the photograph/video in publications or other media material produced, used or contracted by LifeBUILDERS including but not limited to brochures, invitations, books, newspapers, magazines, television and websites.

6. Other. I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the States of Michigan, and that this Release shall be governed by and interpreted in accordance with the laws of the States. I agree that in the event that any clause or provision of the Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of the Release, which shall continue to be enforceable.

Volunteer Name: (please print) _____

Signature: _____ Date: _____

Witness Name: (please print) _____

Signature: _____ Date: _____

Volunteer Disclosure & Authorization Background Investigation

To provide the safest environment possible for youth, organization policy requires PRIOR TO volunteering with LifeBUILDERS, other than volunteering with neighborhood blight removal or housing rehabilitation, that volunteers must have a background check completed and the results reviewed by LifeBUILDERS staff.

In connection with your volunteer service with LifeBUILDERS, notice is hereby given that a consumer report and/or investigative consumer report may be obtained from a consumer reporting agency for employment purposes. These reports may contain information about your character, general reputation, personal characteristics and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends or associates. The reports may also contain information about you relating to your criminal history, driving and/or motor vehicle records, education or employment history, or other background checks. The scope of this notice and below authorization is not limited to the present and, if you are engaged as a volunteer, will continue throughout the course of your service and allow LifeBUILDERS to conduct future screenings for retention, promotion or reassignment, as permitted by law and unless revoked by you in writing. You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting the Consumer Reporting Agency. For information about the Consumer Reporting Agency's privacy practices, please reference the contact information located at the bottom of this form. Acknowledgement and Authorization By signing below I hereby authorize the obtaining of consumer reports and/or investigative consumer reports by LifeBUILDERS at any time after receipt of this authorization and throughout the course of my service as a volunteer, if applicable.

I understand that I have the right, upon written request made within a reasonable amount time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report to Protect My Ministry client show- Protect My Ministry, LLC., 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618 or 1-800-319-5581. For information about Protect My Ministry's privacy practices, see www.protectmyministry.com

Agreement and Signature	
By signing below I hereby authorize the obtaining of consumer reports and/or investigative consumer reports by LifeBUILDERS at any time after receipt of this authorization and throughout the course of my service as a volunteer, if applicable.	
Full Legal Name	First: _____ Middle: _____
	Last: _____
Signature	_____
Date	_____

Thank you for completing this application form and for your interest in volunteering with us.

PLEASE RETURN COMPLETED FORM BY MAIL, SCANNED EMAIL OR IN PERSON AT OUR OFFICE BETWEEN 9:00AM – 4:00PM, MONDAY – THURSDAY.

**Mail to: LifeBUILDERS
20141 Kelly Road
Detroit, MI 48225**

Email to: msielawa@lifebuildersdetroit.com

OFFICE USE ONLY

Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	Date Approved/Denied _____	Determining Staff Member _____
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