



VOLUNTEER INFO

NAME _____ **DATE OF BIRTH** _____

ADDRESS _____ **CITY/ZIP** _____

PHONE # _____ **EMAIL** _____

Do you have a church affiliation? **YES** **NO**
• **If yes, what is the name of the church?** _____

Are you currently in a discipleship or accountability group? **YES** **NO**

What languages do you speak? _____

What is your current profession? _____

What are your volunteering preferences: (please circle)

- **INSIDE** **OUTSIDE** **NO PREFERENCE**

- **MEN** **WOMEN** **JUVENILES** **NO PREFERENCE**

PLEASE LIST ANY PRIOR MINISTRY EXPERIENCE

TITLE / POSITION / DUTY

WHEN / WHERE / HOW LONG

_____	_____
_____	_____
_____	_____

Have you ever been incarcerated? **YES** **NO**
• **If yes – where & when** _____

EMERGENCY CONTACT INFO:

NAME _____ **CONTACT #** _____

RELATIONSHIP _____

SKILLS / AREAS OF INTEREST

___ ADMIN

___ FUNDRAISING

___ RECRUITING

___ EVENT PLANNING / COORDINATION

___ TECH / PODCAST PRODUCTION

___ TEACHING

___ MUSIC (INSTRUMENTAL OR VOICE)

___ ARTIST / GRAPHIC DESIGN

___ COUNSELING

___ WORSHIP

___ LEADERSHIP

___ NONPROFIT EXPERIENCE

___ NEWSLETTER

___ SOCIAL MEDIA

___ WEBSITE DESIGN/MAINTENANCE

___ PRINTING

___ GOAL WRITING

___ MERCHANDISING / BRANDING

___ COMMUNICATIONS

___ SCHEDULING

___ CATERING / COOKING

___ BOARD EXPERIENCE

___ ANY OTHER SUPERPOWERS BESTOWED ON YOU BY GOD – THAT ARE NOT LISTED

How do you envision yourself serving with mercy unleashed?

Why are you interested in volunteering with mercy unleashed?

How far are you willing to travel?