



Volunteer Application

Today's Date: _____

Location Preference(s): Waynesville Thrift Store _____ Pantry _____ Genesis (Mandatory 40 hours of training) _____

Please print clearly.

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ E-Mail: _____

Are you younger than 18 years old? Yes _____ No _____ If yes, you will need Parent/Guardian supervision.

Emergency Contacts: _____ DOB: _____ mm/dd

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Please list any skills that you have that would help with the volunteer placement.

Do you have any limitations that might impact your volunteer work? Yes No

If yes, please explain: _____

Please read and initial each statement below.

- I understand that Good Samaritan and its subsidiary ministries are faith-based organizations built on Christian beliefs and values as stated in their Statement of Faith. I agree to abide by any moral guidelines that may result from these beliefs including but not limited to: refraining from the use of profanity, practicing positive customer service and exemplifying a responsible work ethic while on any premises. _____
- I understand that although I am a volunteer, I am depended on to be timely and perform my duties in their entirety to the best of my ability. _____
- I understand that clients and customers have the right to their privacy and that am charged with keeping their identity and any information I come in contact with confidential. _____
- I hereby certify that all entries on this application are true. I understand that the information is subject to verification and I consent to criminal history background check. _____
- I understand that any of the information given will be held confidential. _____

***Good Samaritan will not accept volunteers with certain criminal offenses: (assault, abuse, theft, manufacturing/selling/distributing unlawful substances. _____**

Signature: _____