VOLUNTEER/UNPAID INTERN APPLICATION PLEASE ATTACH RESUME



A	APPL1	ICANT	IN	FORMA	TION								
Last Nam	ne						First					M.I.	Date
Street Ad	ldress											Apart	ment/Unit #
City							State					ZIP	· · · · · · · · · · · · · · · · · · ·
Phone							E-mail Addr	E-mail Address					
Social Security # Date of Birth													
Field Staff Supervisor Driver's Licer							se # State Issu			ed			
Have you ever worked for InFaith before? YES						NO 🗌	If so, when?						
Have you ever been convicted of a felony? YES						NO 🗌	If yes, explain.						
Have you ever participated in, or been accused, convicted, or pleaded guilty or no contest to abuse or any sexual misconduct?						NO 🗌	If yes, explain.						
		DUCATION											
High Scho	ool						Address						
From		Т	0		De	gree earned:							
College							Address						
From		То		Degree earned:									
Other		· _ · /				Address							
From		То			De	gree earned:							
R	REFEF	RENCE	ES										
	st three	e persol	nal ol	r profess	sional refer	rences.				1			
(1) Full Name							Relationship						
Company								Phone					
Address									Email				
(2) Full Name									Relationship				
Company								Phone			ne		
Address								Email			ail		
(3) Full Name								Relationship			ationship		
Company								Phone					
Address										Ema	ail		

CURRENT EMPLOYMENT (IF APPLICABLE)					
Company	Phone				
Address	Supervisor				
Job Title					
SPIRITUAL LIFE					
Church You Attend:	Address				
Pastor's Name	Phone #				

Please briefly describe when you became a Christian and what Jesus means to you today (attach additional page, if needed):

AUTHORIZATION AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to acceptance as an InFaith volunteer or volunteer internship, I understand that false or misleading information in my application or interview may result in my release. I understand that the completion and/or execution of this application does not ensure my participation or position with InFaith as a volunteer, nor does it obligate me or the organization in any way. Further, this application does not replace the application process for a paid position with InFaith.

<u>Background Authorization</u>: I hereby authorize and request any present or former employer, school, credit agency, financial institution, law enforcement agency, city, state, county, and federal court and agency, military service or other persons having personal knowledge about me, to furnish InFaith with any and all information in their possession regarding me in connection with this application. I am willing that a photocopy of this authorization be accepted with the same authority as the original. My signature signifies my acceptance that a full background check, including a criminal history file, may be used for the purpose of evaluating me for the position in which I have applied.

Signature of Applicant	Date
FOR OFFICE USF	
OFFICE	
USF	