

VOLUNTEER APPLICATION



International House
429 E. Dupont Rd. #151
Fort Wayne, IN 46825
Phone: (260) 482-6100
Email: ann@ihouse.org

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

Mobile Phone: _____ Email Address: _____

Birth Date: _____ Age: _____ Marital Status: • Single • Married

Occupation: _____ • Divorced • Widowed

Application Date: _____ Referred by: _____

Volunteer Experience: _____

Missions Experience:
(Long-term and short-term) _____

Educational Experience: _____

Skills I would like to share: _____

My hobbies are _____

Are you a personal disciple of Jesus Christ, believing salvation is only through Him, according to 1 Timothy 2:5? If so, please describe your salvation experience. _____

Do you attend church regularly? No
If so, what church? Yes _____

Are you involved in any local ministry? If so, describe: _____

Why would you like to volunteer with International House? _____

PERSONAL REFERENCES

(Not former employers, relatives, or International House Workers)

Reference #1

Reference #2

Name: _____	Name: _____
Address: _____	Address: _____
State: Zip	State: Zip
City: _____	City: _____
Phone: _____	Phone: _____
E-mail: _____	E-mail: _____
Relationship: _____	Relationship: _____

BACKGROUND CHECK

Please enter your name and address as listed on your Driver's License

Name: _____

Address: _____

- | | | |
|---|-------|------|
| 1. Do you use illegal drugs? | • Yes | • No |
| 2. Have you ever been convicted of a felony in any U.S. state or foreign country? | • Yes | • No |
| 3. In the past three years have you been at fault for any accidents? | • Yes | • No |
| 4. In the past three years have you had any moving traffic violations? | • Yes | • No |
| 5. In the past three years, has any company canceled or refused to provide you with auto insurance? | • Yes | • No |
| 6. In the past three years have you had your driver's license revoked, suspended, or restricted? | • Yes | • No |
| 7. In the past three years have you had any physical impairment other than corrective lenses? | • Yes | • No |
| 8. In the past three years have you ever been charged with or convicted of DWI or DUI? | • Yes | • No |

If you answered "yes" to any of these questions, please give full details below.

I give International House permission to purchase a copy of my driving record and to verify my insurance coverage if needed and to run a criminal background check. • Yes • No

Driver's License Number _____	Class: _____	Restrictions: _____
Issuing State: _____	Issued Date: _____	Exp. Date: _____
Signature: _____		Today's Date: _____