



INTEREST APPLICATION for VOLUNTEERS & MENTORS

Please note that your responses to questions WILL NOT disqualify you from participating as a Dew4Him Ministries volunteer.

ASSURANCE OF CONFIDENTIALITY: The information disclosed in this application is for internal use only and will not be shared with any person or organization outside of Dew4Him Ministries.

Full Name:	<input type="checkbox"/> Male	<input type="checkbox"/> Female								
Street Address:										
City:	State:	Zip Code:								
Email Address:										
Daytime Phone Number:										
Name of Church (if any):	Are you a member? <input type="checkbox"/> YES <input type="checkbox"/> NO	Pastor's Name:								
Date of Birth:	Age:									
Ethnicity: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Caucasian</td> <td style="width: 50%;"><input type="checkbox"/> Hispanic</td> </tr> <tr> <td><input type="checkbox"/> Native-American</td> <td><input type="checkbox"/> Asian</td> </tr> <tr> <td><input type="checkbox"/> African -American</td> <td><input type="checkbox"/> Prefer not to answer</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Other: _____</td> </tr> </table>			<input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Native-American	<input type="checkbox"/> Asian	<input type="checkbox"/> African -American	<input type="checkbox"/> Prefer not to answer		<input type="checkbox"/> Other: _____
<input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic									
<input type="checkbox"/> Native-American	<input type="checkbox"/> Asian									
<input type="checkbox"/> African -American	<input type="checkbox"/> Prefer not to answer									
	<input type="checkbox"/> Other: _____									
If you speak any language(s) other than English, please list here:										



APPLICATION for VOLUNTEERS & MENTORS

1. In which program are you seeking to become involved?

- Mentor
- Volunteer
- I am not sure yet

2. Please check all that apply.

- I have completed Mentor training
- I have completed Volunteer training
- I am interested in Mentor training
- I am interested in Volunteer training

3. In what area are you most interested in becoming involved? Check all that apply.

- Social Wellness Programs (e.g. Cooking, Knitting, Board Games, Active Listening, Social Skills, counseling/therapy)
- Occupational Wellness Programs (e.g. workplace productivity, occupational hazards)
- Financial Wellness Programs (e.g. Family or Individual Money Management)
- Environmental Wellness Programs (e.g. Gardening, Composting, Canning)
- Physical Wellness Programs (e.g. Fitness, Cosmetology, Yoga, Healthy Eating, First Aid)
- Intellectual Wellness Programs (e.g. Poetry, Foreign Language, Literacy, Public Speaking)



**APPLICATION for
VOLUNTEERS & MENTORS**

- Spiritual Wellness Programs (e.g. Bible Study, Chorus, Pastoral Counsel)
- Emotional Wellness Programs (e.g. Mindfulness, Meditation, Counseling/Therapy)

4. What special skills/experience do you have that might be of particular value for this ministry?

5. What other volunteer experience do you have? (Please include the organization, program, approximate dates, and a point of contact for each program.)

Check all that apply:

5. Have you ever at any time ever:



**APPLICATION for
VOLUNTEERS & MENTORS**

- Been arrested for any reason?
- Been convicted of, or pleaded no contest to any crime?
- Engaged in, or been accused of, convicted or pleaded guilty
- or no contest to abuse or sexual misconduct?

6. Are you aware of:

- Having any traits or tendencies that could pose any threat to children, youth, or others?
- Any reason why you should not work with children, youth or others?

If the answer to any of these questions is “yes”, please explain in detail:

7. Independent References:

List three references that are not related to you. Please include: Full name/Relationship, Address, and Phone Number

1. _____
2. _____
3. _____