

Volunteer Application

Some questions contained in this application are extremely personal. The answers will be held in strict confidence. If you are uncomfortable answering any items, leave them blank but do plan to discuss them during your interview.

Name			D.O.B	
(First)	(Middle Initial)	(Last)		
Address				
(Street)		(City)	(State)	(Zip)
Primary Phone #		E-Mail		
Education Backgro	ound:			
School	Major			
Graduation Year				
School	Major			
Graduation Year				
Present Employme	ent (if applicable):			
Organization		Dates of Service: From	To	
Phone				
Please describe any other	past work experience			
General Informatio	n:			
I. How did you first becor	ne aware of Mend Medical Se	ervices?		
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2. Briefly state what make	es you interested in working v	with Mend Medical Services.		
				

3. What specific skills, talents, gifts, or personality traits would you bring to this organization?
4. What do you consider your areas of strength?
5. What do you consider your areas of weakness?
6. List previous volunteer work including when, where, and how long.
7. List previous work in a ministry including when, where and how long.
8. If you are married, to what extent is your spouse supportive of your application to volunteer at Mend?
Additional Information:
 Do you consider yourself a Christian? YES NO If yes, how long have you been a Christian? Please write a brief statement about how your faith would affect your work with Mend Medical Services?
3. Are there any types of persons with whom you have difficulty working?
4. How do you handle conflict with others?
5. Please provide the following information concerning your local church: Church Name
Pastor's Name
Positions in which you have served.

6. Have you ever counseled a woman who was	considering an abortion? YES NO
a) Explain:	
7. Have you had any experiences relating to about	ortion? YES NO
8. Have you ever known an unwed mother?	YES NO
9. Are you currently or have you ever been invo	olved in seeking to adopt a child? YES NO
10. Under what circumstances would you consi	der abortion as an alternative for a woman with an unplanned pregnancy?
Never an option	Physical defects/handicaps of unborn child
Rape or incest	Hostile Partner
To save the mother's life	Extreme psychological distress
Financial hardship	Other (specify)
11. How would you rate yourself in the following	areas:
Knowledge of abortion methods	excellent good fair poor
Knowledge of current laws concerning abor	rtion excellent good fair poor
Knowledge of adoption process	excellent good fair poor
Knowledge of pregnancy & birthing	excellent good fair poor
Knowledge of what the Bible teaches about	life excellent good fair poor
2. What are your thoughts on sexual intercourse	e outside of marriage?
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3. What questions, if any, would you like to have	e someone from Mend address?
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Volunteer Availability and Commitm	
4. Are you able to volunteer in the office on a wo	•
,	at Mend Medical Services? weekly monthly
·	apply. Mon Tues Wed Thu Fri
7.Which area(s) interest you for your volunteer	
Direct Client Interface	Fund-raising
Educational Mentoring	Special Events/Projects
Administrative/ support services	Community Presentations
Ultrasound/Nurse	Other
Social Networking	

18. References:

Please list persons who are NOT related to you and who have known you for at least two years.

NAME	ADDRESS	PHONE	YEARS ACQUAINTED	RELATIONSHIP

Mission Statement - Our mission is to empower and provide women with life-affirming alternatives in an unplanned pregnancy through the love of Jesus.

Our Purpose - Mend is a private, non-profit, life affirming organization whose purpose is to help women find and implement positive, loving solutions for unplanned pregnancies. This ministry encourages women to choose life by offering support and assistance during these times of crisis. Mend provides services to women in the Tulsa Metropolitan area without regard to race, age, financial status or religious preferences.

Statement of Faith - As individuals representing the organization God has built and grown, Mend Medical Services, can affirm these statements about our collective and individual faith:

We believe there is one God, the creator of all that exists, who is infinitely perfect, existing eternally in three persons: Father, Son and Holy Spirit.

We believe Jesus Christ to be truly God and, in His incarnation, truly man.

We believe Jesus was born of the virgin Mary, conceived of the Holy Spirit, died on a cross for our sins, and was raised from the dead for our justification.

We believe Jesus is now seated at the right hand of God in majesty, making intercession as our High Priest. He will come again to establish His kingdom of righteousness and peace.

APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that the facts set forth in this Volunteer Application are true and complete to the best of my knowledge, and I authorize Mend Medical Services to verify their accuracy and to obtain reference information concerning my character and capabilities. I release Mend Medical Services and any person or entity providing such reference information from all liability relating to the provision of such information or relating to any decisions made based upon such information. If I become a volunteer for Mend Medical Services, I agree to fully adhere to its policies and guidelines, including those rules relating to maintaining confidentiality. I certify that I have read and am in full agreement with the Mend Medical Services Mission Statement, Statement of Purpose and Statement of Faith.

Signature of Applicant	Date	
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Thank you for taking the time to complete this Volunteer Application and for your interest in Mend Medical Services.