

## QYFC/ Youth Unlimited

Box 233 Belleville ON K8N 5A2 (613) 969-0471 / <u>info@gyu.ca</u> / <u>www.QYU.ca</u>

## **VOLUNTEER APPLICATION**

This form is to be completed by any individual **16 years or older** who may hold a position of leadership in a community event or participation in a program in which QYFC/ Youth Unlimited has primary responsibility. In order to best serve the young people that we work with, QYFC/Youth Unlimited has devised a procedure under the Risk Management Policy whereby all volunteers are 13658required to complete *The Consent to Disclosure of Personal Information Form* (Police Check). These are to be obtained at the expense of the volunteer applying for a position. In the case where a police check has been already completed within the past 24 months a copy of the original form is needed to accompany this application. The intent of this procedure is to ensure the protection of our volunteers and our youth. Please be assured that maximum confidentiality will be maintained. A volunteer package is provided *only* for those who work directly with students.

Volunteer Information								
Name:	Date of Birth: D/M/Y / /							
Pervious Last Name (if applicable):								
Do you have/had any other names or alias? (circle)	YES or NO							
If yes please list names:								
Current Address:								
Phone: HOME: WORK:	CELL:							
Email:	Drivers License #:							
Reference #1								
Name:	Job Title:							
Phone: HOME: WORK:	CELL:							
Email:								
How do they know you?	How long have they known you?							
Reference #2								
Name:	Job Title:							
Phone: HOME: WORK:	CELL:							
Email:								
How do they know you?	How long have they known you?							
Reference #3 C	urrent Employer							
Present Employer:	Position:							
Status: (circle) Part-time Full-Time	Supervisors Name:							
Employer's Phone #:	May we contact your employer? YES or NO							
Main Responsibilities:								
Church Information								
Current Church:	Pastor:							
Current Pastor contact/ Phone: Ema	ail:							
Former Church (if at current church less than 2 years):								
Alternate Church Contact: Pho	ne:							

In light of your personal abilities, what would you like to see accomplished through your time volunteering with Quinte YFC/ Youth Unlimited?

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## **Statement of Faith**

- 1. We believe that there is one God, eternally existent in three persons: Father, Son, and Holy Spirit.
- 2. We believe the Bible to be the inspired, the only infallible and authoritative Word of God
- 3. We believe in the Deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return in power and glory.
- 4. We believe that the salvation of lost and sinful people is by the grace of God through faith and the shed blood of the Lord Jesus Christ and that regeneration by the Holy Spirit is absolutely essential.
- 5. We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live godly life.
- 6. We believe in the resurrection of both the saved and lost. "The time is coming when all the dead in their graves will hear the have continued in evil will rise to experience judgment." John 5:28 29
- 7. We believe in the spiritual unity of believes in Christ.

## **Agreement to Commitments**

I, the undersigned, hereby release and discharge Quinte YFC/ Youth Unlimited, its trustees, directors, volunteers, employees, and any other parties from all actions, claims & demands including liability for injury or loss connected to my volunteer activities with Quinte YFC/ Youth Unlimited. In the event of injury or illness, I give full consent to emergency treatment if necessary. I understand that as a volunteer with Quinte YFC/ Youth Unlimited I am also expected to adhere to leadership decisions and directions.

In signing this release I hereby subscribe to the YFC Statement of Faith above and give my full permission to Quinte YFC/ Youth Unlimited to contact my references, as well as use my name, photograph and/or video in connection with my volunteer activities. I understand that I must submit a valid police check before I am permitted to volunteer and that I may be discharged for any misrepresentation or omission on this form or as a result of the verification process. I have answered all questions on this form truthfully and accurately to the best of my knowledge and agree to inform Quinte YFC/ Youth Unlimited of any changes that I become aware of during mu time as a volunteer with Quinte YFC/ Youth Unlimited.

I agree with the contents of this Community Commitment, and I am not currently in violation of this Community Commitment. I wholeheartedly hold the beliefs and accept the commitments set out above, and I promise to continue to do so both during and outside of working hours.

Volunteer Print Name:	Volunteer Signature:	Date:
Witness Print Name:	Witness Signature:	Date:

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QYFC VOLUNTEER ADMINISTRATION (to be completed by QYFC staff only)										
Date Application Receiv	ved by:	ed by:			Staff:					
Program or Event:										
VOLUNTEER LEVEL - Circle One in Each Section:										
DIRECT / I	NDIRECT	MINISTRY/ NON-M			IISTRY	ADULT	STUDENT			
RECORD DATE COMPLETED IN BOXES BELOW:										
INTERVIEW	APPLICATIO	N REFERENCE CHECKS		E CHECKS	CPIC		TRAINING			