Youth ARC•HIVE Volunteer Application Form

Thank you for your interest in volunteering at the Youth Archive! Please complete the application form below. Your information will remain confidential and is used to help us find the best volunteer opportunities for you. You can email the completed form to Curator@youtharchive.org or bring it in person.

Personal Information				
Full Name:		Single _	_ Married _	_ Divorced
Date of Birth:				
Address:				
Street:				
State:	ZIP Code:			
Phone Number:				
Email Address:		Shirt S		
Emergency Conta	act Information			
Name:				
Phone Number:				

Availability

Our main need is during weekday afternoons but we will also need one staff volunteer on hand when homeschool groups, tutors or families book time on the schedule for semiprivate gatherings. Please indicate all times you are available to volunteer:

Day	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			

Sunday

Volunteer Interests
Please check all areas of interested:
Performing Arts
 Game Leader/DJ/MC (active games, dance games)
• Mentoring
• Event Planning
Arts and Crafts
Boxing and Recreation
Administrative Tasks
• Fundraising
• Other (please specify):
Please describe any relevant skills, training, certification or experience you have that would benefit our members:
Background Information
Have you ever been convicted of a felony or misdemeanor? (Answering yes will not necessarily disqualify you.)
• Yes No If yes, please explain:
Are you willing to undergo a background check? (Required for all volunteers.)

Have you ever taken a First Aid/CPR/AED training? Are you willing to get certified?

• ___ Yes ___ No

•	Yes	No
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References

Please provide two references. One who knows your church involvement and one who knows your work/volunteer involvement.

1.	Name:	
ı	Relationship:	
I	Phone Number:	_(for texting)
2. I	Name:	
ı	Relationship:	
ı	Phone Number:	_(for texting)

Agreement and Signature

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that providing false information may result in my disqualification as a volunteer.

I agree to conduct my behavior and converation in accordance with the 5 Solas, the HIVE motto and to help young people build friendships. I agree to refrain from preaching and give only down-to-earth honest answers drawn from my own witness and experience. I agree to pray for the worst offenders rather than try to change them myself.

Signature:	 		
Date:	 		

Thank you for applying! We will review your application and contact you soon.