

# Living Water Charter Ministries - Volunteer Application

Date: \_\_\_\_\_

## Section 1: Personal Information

- Full Name: \_\_\_\_\_
- Preferred Name: \_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- Gender: \_\_\_\_\_
- Preferred Pronouns: \_\_\_\_\_
- Address: \_\_\_\_\_
  - City: \_\_\_\_\_
  - State: CA
  - Zip Code: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_
- Emergency Contact Name:
  - \_\_\_\_\_
- Emergency Contact Phone Number: \_\_\_\_\_
- Languages Spoken: \_\_\_\_\_

## Section 2: Volunteer Interests and Skills

- Why are you interested in volunteering with Living Water Charter Ministries?
- \_\_\_\_\_

- **What skills or experience do you have that you feel would be valuable to our organization?** (e.g., communication, organization, computer skills, specific software, physical abilities, etc.)

- \_\_\_\_\_

- **Please indicate the areas in which you would like to volunteer:** (Check all that apply)

- ☐ Transportation (e.g., driving clients, delivery)
- ☐ Food Services (e.g., food preparation, distribution)
- ☐ Housing Support (e.g., assisting with housing projects, administrative tasks)
- ☐ Life Essentials (e.g., sorting donations, distribution)
- ☐ Administrative Support (e.g., data entry, office tasks)
- ☐ Client Services (e.g., intake assistance, resource navigation)
- ☐ Fundraising/Events
- ☐ Other:

- \_\_\_\_\_

- **Are you interested in any specific programs or services offered by Living Water Charter Ministries?**

- \_\_\_\_\_

- **Do you have any experience working with vulnerable populations?** ☐ Yes ☐ No

- If yes, please describe:

- \_\_\_\_\_

### Section 3: Availability

- **Days of the week you are available to volunteer:** (Check all that apply)

- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday
- ☐ Saturday
- ☐ Sunday

- **Hours of the day you are available to volunteer:** \_\_\_\_\_

- **How many hours per week are you willing to volunteer?** \_\_\_\_\_

- **For what duration are you willing to volunteer?**

- ☐ Ongoing
- ☐ Specific project/event (Please specify): \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

## Section 4: Background Information

- **Have you ever been convicted of a felony?** ☐ Yes ☐ No

- If yes, please explain:  
\_\_\_\_\_  
  - *Note: A conviction does not necessarily disqualify you from volunteering. We will consider the nature of the offense and its relevance to the volunteer position.*

- **Do you have any physical limitations or health conditions that may affect your ability to perform certain volunteer tasks?** ☐ Yes ☐ No

- If yes, please describe:  
\_\_\_\_\_  
\_\_\_\_\_

## Section 5: References

Please provide two professional or personal references (not family members).

- **Reference 1:**

- Name: \_\_\_\_\_
- Phone: \_\_\_\_\_
- Email: \_\_\_\_\_
- Relationship: \_\_\_\_\_

- **Reference 2:**

- Name: \_\_\_\_\_
- Phone: \_\_\_\_\_
- Email: \_\_\_\_\_
- Relationship: \_\_\_\_\_

## Section 6: Volunteer Agreement

- I certify that the information provided in this application is true and complete to the best of my knowledge.
- I understand that Living Water Charter Ministries may conduct a background check, if required for certain volunteer positions.
- I understand that volunteering is done on a non-paid basis, and I agree to abide by the policies and procedures of Living Water Charter Ministries.
- I agree to treat all clients, staff, and other volunteers with respect and maintain confidentiality.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Section 7: Optional Information

- How did you hear about Living Water Charter Ministries?
- \_\_\_\_\_
- Ethnicity (Optional): \_\_\_\_\_
- Race (Optional): \_\_\_\_\_

**Please return this application to:**

Living Water Charter Ministries  
1111 Sixth Avenue, Suite 300 PMB 2005  
San Diego, CA 92101  
Email: lwcmsd@gmail.com  
Tel: (619) 432-7585

**Thank you for your interest in volunteering with Living Water Charter Ministries!**