



Volunteer Application

Personal Information

Name (First) _____ (Middle) _____ (Last) _____ Birth Month / Day _____

Street Address _____ City _____

Home Phone Number _____ Alternate Phone Number/Cell # _____ Email Address _____

Communication preferences: Home Phone Cell Phone Text Email Any

Emergency Contact Name _____ Phone Number _____ Relationship _____

How did you hear about Love INC? _____

Have you ever been convicted of a felony? No Yes Describe: _____

Church Information and Reference

Church Name _____ Denomination _____

Pastor's or Church Leader's Name _____ Phone Number _____

Areas of Interest

- | | | |
|---|---|--|
| <input type="checkbox"/> Mentor* (requires 1-year commitment) | <input type="checkbox"/> General Office Assistance | <input type="checkbox"/> Transport clients to appointments / grocery store |
| <input type="checkbox"/> Budgeting | <input type="checkbox"/> Personal Care Closet assistance | <input type="checkbox"/> Visit neighbor in need |
| <input type="checkbox"/> Life skills | <input type="checkbox"/> Packing | <input type="checkbox"/> Special events / hospitality |
| <input type="checkbox"/> Parenting | <input type="checkbox"/> Organizing | <input type="checkbox"/> Parsonage Ministry |
| <input type="checkbox"/> Faith | <input type="checkbox"/> Distribute at Food banks | <input type="checkbox"/> Moving assistance |
| <input type="checkbox"/> Life Skills Instructor | <input type="checkbox"/> Transport bags to Food banks / Love INC office | <input type="checkbox"/> Bike Outreach |
| <input type="checkbox"/> Reception (greet/answer phones) | <input type="checkbox"/> Grant Writing | |
| | <input type="checkbox"/> Client Intake | |

How often would you like to serve?
 Daily Weekly Monthly As needed Special events

Availability (days & times) _____

- ❖ Please proceed to Page 2
- ❖ If you are interested in Mentoring, please also complete Page 3 of this application.

★ Submit to Love INC office or Email to clearinghousecoordinator@loveincgreaterhershey.org ★
Love In the Name of Christ of Greater Hershey, 245 E. Derry Rd., Hershey, PA 17033
717-835-0101 www.LoveIncGreaterHershey.org

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Spiritual Information

Please describe your relationship with Jesus Christ.

How does your relationship influence your interest in serving?

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Mentor Information – REQUIRED if applying to be a mentor

Please list at least 3 other people who are familiar with your faith and your abilities to serve in ministry to others. We will send them a reference request. Please do not list relatives.

Reference # 1 Name

Street Address

City, State, Zip

Phone Number

Email Address

Reference #2 Name

Street Address

City, State, Zip

Phone Number

Email Address

Reference # 3 Name

Street Address

City, State, Zip

Phone Number

Email Address

BUDGETING MENTORS will be required to provide a recent Credit Report (within the last 60 days) following initial approval of this application. Are you willing to comply with this requirement? YES NO



Safe Practices Affidavit for Volunteers and Employees

I affirm the following:

I have lived in Pennsylvania continuously from: _____

(Month/Year)

I am not disqualified from service as a volunteer or employment as described in Pennsylvania Title 23 Chapter 63 Section 6344(c) and I have not been convicted of an offense similar in nature to those crimes listed in Section 6344(c) under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, The Commonwealth of Puerto Rico of a foreign nation or under a former law of this commonwealth.

Date: _____ Signature: _____
(Month/Day/Year)

Printed Name: _____

Pennsylvania Title 23 Chapter 63 § 6344 (c)

(c) Grounds for denying employment or participation in program, activity or service.--

(1) In no case shall an administrator hire or approve an applicant where the department has verified that the applicant is named in the Statewide database as the perpetrator of a founded report committed within the five-year period immediately preceding verification pursuant to this section.

(2) In no case shall an administrator hire an applicant if the applicant's criminal history record information indicates the applicant has been convicted of one or more of the following offenses under Title 18 (relating to crimes and offenses) or an equivalent crime under Federal law or the law of another state:

Chapter 25 (relating to criminal homicide).	Section 3126 (relating to indecent assault).
Section 2702 (relating to aggravated assault).	Section 3127 (relating to indecent exposure).
Section 2709.1 (relating to stalking).	Section 4302 (relating to incest).
Section 2901 (relating to kidnapping).	Section 4303 (relating to concealing death of child).
Section 2902 (relating to unlawful restraint).	Section 4304 (relating to endangering welfare of children).
Section 3121 (relating to rape).	Section 4305 (relating to dealing in infant children).
Section 3122.1 (relating to statutory sexual assault).	A felony offense under section 5902(b) (relating to prostitution and related offenses).
Section 3123 (relating to involuntary deviate sexual intercourse).	Section 5903(c) or (d) (relating to obscene and other sexual materials and performances).
Section 3124.1 (relating to sexual assault).	Section 6301 (relating to corruption of minors).
Section 3125 (relating to aggravated indecent assault).	Section 6312 (relating to sexual abuse of children).

The attempt, solicitation or conspiracy to commit any of the offenses set forth in this paragraph.

(3) In no case shall an employer, administrator, supervisor or other person responsible for employment decisions hire or approve an applicant if the applicant's criminal history record information indicates the applicant has been convicted of a felony offense under the act of April 14, 1972 (P.L.233, No.64), known as The Controlled Substance, Drug, Device and Cosmetic Act, committed within the five-year period immediately preceding verification under this section.