



# ARCHDIOCESE OF BALTIMORE APPLICATION FOR VOLUNTEER SERVICES

## I. CONTACT INFORMATION

Title (if applicable):  Br.  Deacon  Dr.  Mr.  Ms.  Mrs.  Rev.  Sr.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Suffix \_\_\_\_\_

Other Names Previously Used (if applicable) \_\_\_\_\_

Present Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

( )  Home  Work  Mobile  Other \_\_\_\_\_

Primary Phone \_\_\_\_\_

( )  Home  Work  Mobile  Other \_\_\_\_\_

Alternate Phone \_\_\_\_\_

Are you a member of a parish in the Archdiocese of Baltimore?  Yes  No

If yes, how long? \_\_\_\_\_ Parish Name \_\_\_\_\_ City \_\_\_\_\_

## II. VOLUNTEER SERVICES

Parish  Child Care Facility  School  Other \_\_\_\_\_

Site Name: \_\_\_\_\_

What position(s) are you applying for? \_\_\_\_\_

What interests you about the position? \_\_\_\_\_

What has prepared you for the position for which you are currently applying? \_\_\_\_\_

## III. VOLUNTEER/WORK EXPERIENCE

Have you ever applied for or served as a volunteer or employee to any parish, school, or institution within the Archdiocese of Baltimore?  Yes  No If yes, which location(s)? \_\_\_\_\_

Please list your volunteer/work experience with church/civic/non-profit organization.

(Attach additional sheet of paper if necessary).

ORGANIZATION	DUTIES	DATES	CONTACT	PHONE

## IV. ARCHDIOCESAN POLICY

1. Have you ever had your volunteer services or employment terminated by any parish, school, or institution?  Yes  No

2. Have you been terminated from volunteer service or employment due to suspected child abuse?  Yes  No

3. Have you ever been accused of physically, sexually or emotionally abusing a child?  Yes  No

If you answered YES to any of the above questions, please explain: \_\_\_\_\_