



HOUSE *of* HOPE®

York, PA

Volunteer Application

Personal Information:

Name: _____

Birthday: _____

Address 1: _____

Address 2: _____

City: _____

State: _____

Zip Code: _____

E-mail: _____

Phone: _____

Employment Information:

Current Employer: _____

Address: _____

Phone: _____

Position Held: _____

OK to call at work? Yes No

How did you first become aware of House of Hope?

Please mark the areas in which you are interested in participating:

Office

Special Events

Scholarships

Plumbing/Electrical

Fundraising

Intercessor/Prayer

Database Entry

Photography

Information Systems

Web-Site Design

What gifts, talents or experience would you bring to the program?

Describe both current and past services performed for other ministries or organizations other than your church:

Have you ever been arrested? If yes, please explain:

Have you ever been involved in drug or alcohol abuse? If yes, please explain:

Please explain what you think it takes for a person to become a Christian:

Please give a brief testimony of when you accepted Christ into your life as your Savior:

Please provide the following information about your local Church:

Church Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone: _____

Senior Pastor's Name: _____

Youth Pastor's Name: _____

Denominational ties, if any: _____

How long have you been involved in your Church? _____