



# Lighthouse Youth Center

*"A beacon for Christ to the youth of the community."*

*"Let your light shine before men, that they may see your good deed and praise your Father in heaven." Matthew 5:16*

## Volunteer Application Form

*This information will be used to match your expertise and skills with Lighthouse's needs.*

Name \_\_\_\_\_ Home Number ( ) \_\_\_\_\_

Email address \_\_\_\_\_ Mobile Number ( ) \_\_\_\_\_

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

Date of Birth \_\_\_\_\_ Ethnicity \_\_\_\_\_ Gender \_\_\_\_\_

Place of Employment \_\_\_\_\_ Name of Supervisor \_\_\_\_\_

Job Position \_\_\_\_\_ Business Number ( ) \_\_\_\_\_

School attending (if applicable) \_\_\_\_\_

Home Congregation \_\_\_\_\_ Pastor \_\_\_\_\_

GIVE TWO REFERENCES: (We may contact them prior to application approval.)

\_\_\_\_\_  
 Name Phone Number Relationship # Years Known

\_\_\_\_\_  
 Name Phone Number Relationship # Years Known

Please tell us days and hours you are available to volunteer:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Describe any previous volunteer experience or community work.

\_\_\_\_\_

How did you hear about Lighthouse Youth Center? \_\_\_\_\_

Why do you wish to serve as a volunteer? \_\_\_\_\_

What hobbies, interests, or skills do you have?

---

Would you be interested in sharing these hobbies with the youth at Lighthouse? \_\_\_\_\_

Mark all opportunities you may be interested in. Note that some may require additional training.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Youth Tutor/Mentor       | <input type="checkbox"/> Office Work          | <input type="checkbox"/> Video Editing or Recording |
| <input type="checkbox"/> Small Group Facilitator  | <input type="checkbox"/> Human Resources      | <input type="checkbox"/> Theater/Acting             |
| <input type="checkbox"/> Gardening                | <input type="checkbox"/> Accounting           | <input type="checkbox"/> Music/Musician             |
| <input type="checkbox"/> Facility Upkeep/Cleaning | <input type="checkbox"/> Communications       | <input type="checkbox"/> Creative Arts              |
| <input type="checkbox"/> Special Events Planning  | <input type="checkbox"/> Grant Writing        | <input type="checkbox"/> Crafting                   |
| <input type="checkbox"/> Recreation Leader        | <input type="checkbox"/> Fundraising          | <input type="checkbox"/> Carpentry                  |
| <input type="checkbox"/> Weight Room Supervisor   | <input type="checkbox"/> Graphic Design       | <input type="checkbox"/> Electrician                |
|   | <input type="checkbox"/> Social Media         | <input type="checkbox"/> Painting                   |
|   | <input type="checkbox"/> IT                   | <input type="checkbox"/> Plumbing                   |
|   | <input type="checkbox"/> Software Programming |   |
|   | <input type="checkbox"/> Photography          |   |

Have you ever been accused or convicted of a crime other than a minor traffic violation? If yes, please explain. (This does not automatically disqualify you for volunteer work.)

---

---

Will you consent to attend an orientation for volunteers?  Yes  No

*I understand that Lighthouse Youth Center will not be responsible for property loss which may occur to me while performing volunteer service. I also understand that I will not receive any compensation from Lighthouse Youth Center or the individual or anyone else for serving as a volunteer. I am aware that giving false information may result in the rejection of this application.*

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

**Please turn in this completed application to the appropriate site director.**