

Our Lady's Inn Volunteer Application

Our Lady's Inn is seeking compassionate, caring volunteers who share our commitment to serving pregnant women and their children in their time of need.



DATE: ____/____/____

FIRST NAME: _____ LAST NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

Is this address -check one: [] temporary or [] permanent ?

Home Phone: () ____-____ Work Phone: () ____-____

Cell Phone: () ____-____ Age: []Under 18* --or-- []18 & over**

E-mail Address: _____ @ _____ . _____

SCHOOL CURRENTLY ATTENDING: _____

EDUCATION: COLLEGE: _____ DEGREE: YES / NO
 HIGH SCHOOL: _____ DIPLOMA OR G.E.D.?: YES / NO
 OTHER: _____ DEGREE: YES / NO

CHURCH: _____

ARE YOUR IMMUNIZATIONS UP TO DATE? YES ____ NO ____

CHARACTER REFERENCE Name: _____ Phone # [] _____

Address: _____ City: _____ State: _____ Zip Code: _____

HOW DID YOU HEAR ABOUT OUR LADY'S INN? _____

EMPLOYER: _____

CURRENT WORK SCHEDULE: _____

<u>DAYS &</u>	<u>HOURS AVAILABLE TO VOLUNTEER</u>	<u>DAYS &</u>	<u>HOURS AVAILABLE TO VOLUNTEER</u>
<u>MON</u>	AM/PM to AM/PM	<u>FRI</u>	AM/PM to AM/PM
<u>TUES</u>	AM/PM to AM/PM	<u>SAT</u>	AM/PM to AM/PM
<u>WED</u>	AM/PM to AM/PM	<u>SUN</u>	AM/PM to AM/PM
<u>THURS</u>	AM/PM to AM/PM		

AREAS OF INTEREST (CHECK AS MANY AS APPLY):

- [] Childcare
 - [] Driving & Errands
 - [] Fundraising, public relations, media, etc.
 - [] Organizing Donations & Storage Areas
 - [] Helping with large mailings/bulk mail.
 - [] Teaching: __ computers, __ singing/music, __ sewing, __ exercising, __ or other skills and interests you would like to share/specify: _____
 - [] Other: _____
- [] Office/Clerical Work
 - [] Tutoring/Literacy
 - [] Apartment & Employment Search
 - [] Motivational Speaking
 - [] Main office/answering phones
 - [] Property Upkeep/Cleaning

OUR LADY'S INN -- MISSION: Please read the following Our Lady's Inn Mission Statement and indicate below if you are not comfortable with any of these statements. Completing this application does not put you under any obligation to volunteer.

MISSION STATEMENT - Our Lady's Inn

We believe every unborn child has a right to life and every pregnant woman has the right to give birth with dignity.

We are dedicated to providing safe shelter, food, clothing, education, counseling and vocational guidance to address the physical, mental and spiritual needs of women in crisis pregnancies, as an alternative to abortion.

We are committed to providing a more stabilized living situation based on spiritual values, giving help and hope for a better future, changing one life, one woman, one family at a time.

Your Comments: _____

APPLICANT'S SIGNATURE: _____ DATE: ____/____/____

➔ ****If you are under the age of 18:***

- Please state your age: _____ and date of birth: ____/____/____
- For supervision purposes, will an adult be able to stay with you during your volunteer time at Our Lady's Inn? (NOT required in all situations.) Yes[] No[]
- Please have your parent/legal guardian sign the consent below:

***PARENTAL/LEGAL GUARDIAN CONSENT SUPPLEMENT**

I, _____, hereby consent for my child _____, to serve as a volunteer at Our Lady's Inn.

Parent/Legal Guardian's Signature: _____

Parent/Legal Guardian's Written Name: _____

Date: ____/____/____

**** PLEASE NOTE: If you are 18 years of age or over, please ask us for the required Missouri State screening form.**

EMERGENCY CONTACT INFORMATION

Emergency Contact's Full Name: _____

Emergency Contact's Phone Number(s): () ____-____ () ____-____

PLEASE MAIL, E-MAIL, FAX OR BRING THIS APPLICATION TO:

<u>OUR LADY'S INN-ST. LOUIS</u>	4223 S. Compton, St. Louis, Missouri 63111
Phone: (314) 351-4590 FAX: (314) 351-2119	E-MAIL to: LSmart@OurLadysInn.org
--OR--	
<u>OUR LADY'S INN-ST. CHARLES</u>	3607 Highway D (near DD), Defiance, Missouri 63341
Phone: (636) 398-5375 FAX: (636) 398-5376	E-MAIL to: BBeauparlant@CenturyTel.net