
VOLUNTEER APPLICATION FORM

Applicant's FULL name: _____

Date of birth: _____ Email address: _____

Residential Address: _____

Postal (if different from above): _____

Contact numbers: (Home) _____ (Mobile) _____

Education & Professional Training

Please list all short courses, certificates (incl. VCE), diplomas and degrees you have completed or are currently undertaking.

Course / Certificate / Degree	Institution	Dates commenced & completed
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Work experience

Please list all work experience you have had including paid employment and volunteer positions.

Position	Company / Organisation	Years of employment
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Do you have any other experience or can you provide other information that may be useful for us to know?

Life-Gate Involvement

Please circle all Life-Gate ministries you wish to be involved in:

- | | | |
|--|-----------------|--------------------|
| Office Administration | Street Outreach | Food preparation |
| Counselling | Cleaning | Art-therapy |
| Fundraising | Maintenance | Event organisation |
| NEW: Food Hamper / Kindness Kit Packing | | |

We'd love to know why you're interested in volunteering with our organisation? What motivates you, and why would you like to be part of the team?

Spiritual beliefs and development

Life-Gate is a Christian organisation. *While most volunteer opportunities with our organisation do not require volunteers to be Christians, we ask all volunteers to show respect for the Christian beliefs that underpin our organisation.*

To help us get to know you, please take the time to thoughtfully answer these questions:

Do you believe in Jesus Christ as your Lord and Saviour? Yes / No

If yes, briefly describe when / how you came to accept Jesus as Lord and Saviour:

If no, what do you believe? How would you describe your belief system?

Have you ever been involved in the occult, witchcraft (etc)? Yes / No

If yes, please give details (include years of involvement):

Is there any other information you can provide that may be helpful for Life-Gate staff to be aware of? *(NB: All information provided will be kept confidential)*

Do you regularly attend church? Yes / No

If yes, please complete the following questions:

Name of church: _____ Years attended: _____

Pastor / Minister's name: _____ Contact no.: _____

Do you have any responsibilities in your church? Please specify.

Are these responsibilities likely to conflict with your Life-Gate involvement? Why or why not?

Working With Children Check

As Life-Gate has involvement with youth and minors, all volunteers are required to hold a current 'Working with Children Check'.

Do you hold a valid WWCC card? Yes / No

WWCC No: _____ Expiry date: _____

Note: If you do not hold a current WWCC card, our team can assist successful applicants with the online application process.

References:

Please provide the names and contact details of 3 references. Preferably, (i) an employer, (ii) your church pastor or minister and (iii) someone who works or lives with you.

Name:	Relation to you:	Contact details:
1. _____		
2. _____		
3. _____		

Applicant's signature: _____ **Date:** _____

FOR OFFICE USE ONLY

DATE APPROVED: ____ / ____ / 2022 AUTHORISED BY: _____