



| Mission Statement | | | |
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| Our purpose is to prevent abortion by offering mothers and their families information, and services that will empower them to choose life for their child and sexual integrity for themselves. | | | |
| General | | | |
| Name | | Date | |
| Address | | | |
| City/State/Zip | | | |
| Home Phone | | Cell Phone | |
| Work Phone | | E-mail | |
| Check One | <input type="checkbox"/> I check my e-mail often | <input type="checkbox"/> I do NOT check my e-mail often | |
| Marital Status | <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Engaged <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed | | |
| Spouse's Name | | | |
| How does your spouse feel about you volunteering at PRMC? | | | |
| | | | |
| Names/Ages of Children | | | |
| Occupation | <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Retired | | |
| We ask for a one-year commitment of service, are you comfortable with this commitment? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If you have extenuating circumstances that may prevent you from volunteering for a year or more, what are they? | | | |
| | | | |
| Volunteer / Professional / Life Experience | | | |
| Previous volunteer service: | | | |
| | | | |
| How many hours per week or month can you realistically and reliably volunteer right now: | | | |
| Professional, volunteer or special skills you can offer (computer skills, second language, etc): | | | |
| | | | |
| Have you ever attended a crisis pregnancy center volunteer training? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If yes, when and at what center? | | | |
| Previous life experiences that could help you contribute to PRMC: | | | |
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Christian Faith and Practices

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| Church you attend | |
| I attend | <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Occasionally <input type="checkbox"/> Never |

Do you understand and agree with PRMC's Statement of Faith, Commitment of Care and Volunteer Ethics Agreement? Yes No Not sure
Please reference any portions you do not agree with:

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Why do you want to join the ministry of PRMC?

The PRMC is a Christian ministry; we look to God for guidance and strength. He is the power which enables us and works through us to serve our clients. Please briefly describe your relationship with God:

How do you look for His guidance in your life?
(i.e., attending church, Bible study, Sunday school class, prayer group or regular personal quiet/prayer time)

Adoption

Do you have any experiences with legal adoption? Yes No
Please comment on those experiences:

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What are your impressions of adoption?

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Sexual Integrity

Are you now living a lifestyle of sexual integrity, abstinence if single or faithful within marriage? Yes No

How do you feel about sexual activity outside the commitment of marriage?

We do not encourage or condone sexual activity outside marriage, and we do not refer for birth control. What are your thoughts and feelings on this policy?

Abortion

Have you ever counseled a woman considering abortion? Yes No

Please comment on that experience:

Have you ever counseled a woman who was post-abortive? Yes No

Please comment on that experience:

Under what circumstances do you consider abortion acceptable (i.e. - rape, incest, etc.)?

What are your thoughts and feelings concerning someone who is considering abortion?

How do you feel about someone who has had an abortion?

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REFERENCES

Please provide three personal references (persons whom you are not related to). One of these should be your pastor or a small group leader with whom you are regularly involved.

| Name | Address | Phone | Email | Relationship/length |
|------|---------|-------|-------|---------------------|
| | | | | |
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OPPORTUNITIES

Please see the Volunteer Opportunities and mark the boxes that apply

| Client Contact | | Non-Client Contact | |
|--------------------------|--|--------------------------|---------------------------------|
| <input type="checkbox"/> | Client Advocate Peer Counselor | <input type="checkbox"/> | PRMC Church Liaison |
| <input type="checkbox"/> | Learn Earn And Plan (LEAP) Baby Boutique | <input type="checkbox"/> | Housekeeper(s) |
| <input type="checkbox"/> | LEAP Teacher | <input type="checkbox"/> | Handyman |
| <input type="checkbox"/> | Diaper Diva | <input type="checkbox"/> | Fund Raising Committee |
| <input type="checkbox"/> | Front Desk Receptionist | <input type="checkbox"/> | Public Relations Representative |
| <input type="checkbox"/> | Clerical Help | <input type="checkbox"/> | |

Please select your availability (check all that apply)

| | | | | | |
|--------------------------|-----------|---------------|--------------------------|-----------|----------|
| <input type="checkbox"/> | Monday | 9am - 1pm | <input type="checkbox"/> | Monday | 1pm -5pm |
| <input type="checkbox"/> | Tuesday | 9am - 1pm | <input type="checkbox"/> | Tuesday | 1pm -5pm |
| <input type="checkbox"/> | Wednesday | 9am - 1pm | <input type="checkbox"/> | Wednesday | 1pm -5pm |
| <input type="checkbox"/> | Thursday | 9am - 1pm | <input type="checkbox"/> | Thursday | 1pm -5pm |
| <input type="checkbox"/> | Friday | 9am - 12 noon | <input type="checkbox"/> | | |