

Shepherd's Spring Volunteer Application

Statement of Practice: In order to safe-guard the well-being of participants served, Shepherd's Spring will investigate the accuracy of the data provided in the application process for all applicants before appointment to the staff can be made. This investigation may include, but is not necessarily limited to, reference checks with past employers, educational institutions, volunteer organizations and agencies, civic groups, and law-enforcement agencies. This information will be used only for purposes of evaluating a person for a position, volunteer or paid staff at Shepherd's Spring.

Please complete the following application and those areas that pertain to your volunteer position.

Full Name _____ US Citizen ____ Yes ____ No

Home Address _____

City _____ State _____ Zip code _____

Email _____ Home # _____ Cell # _____

Home Church _____ Phone _____ Pastor _____

Occupation: _____ Age: ____ Gender: ____ Male ____ Female (check one)

In case of emergency, please contact _____

Relationship to you _____ phone _____

Why do you want to volunteer at Shepherd's Spring?

POSITION APPLYING FOR: Check all that apply

Food Service Facility Office/Hospitality Heifer Global Village

Please Check next to the areas in which you hold a current certification:
(Please include a copy of your certification)

Red Cross First Aid ____ CPR ____ Red Cross Certified Lifeguard ____ Water Safety Instructor ____

Canoe Instructor ____ Other (please specify) _____

Legal Background

Have you ever been convicted of a crime? ___ Yes ___ No If yes, describe in full _____

Have you ever been convicted of sexual abuse or a crime involving actual or attempted sexual molestation of a minor? ___ Yes ___ No If yes, describe in full _____

Social Networking Sites

With the increased use of social networking sites (Face Book, Twitter, My Space, etc), we reserve the right to check out an individual's site as part of the reference check.

Do you have a site? ___ yes ___ no Site address: _____

Volunteer Experience

_____ N/A

Please list experiences most relevant to working in the position applied for. If no volunteer history, check N/A

1) Organization _____ Phone _____

Location _____

Supervisor's Name and Title _____

Dates you volunteered _____

Description of Responsibilities _____

2) Organization _____ Phone _____

Location _____

Supervisor's Name and Title _____

Dates you volunteered _____

Description of Responsibilities _____

References (do Not list any family members)

Name _____
Address _____
City _____ State _____
Zip _____ Phone _____

Name _____
Address _____
City _____ State _____
Zip _____ Phone _____

Name _____
Address _____
City _____ State _____
Zip _____ Phone _____

Name _____
Address _____
City _____ State _____
Zip _____ Phone _____

For those choosing FOOD SERVICE

WORK SCHEDULE SURVEY:

1. Days you are available _____
2. Hours available those days _____
3. Which shift would you prefer? ____am ____ pm
4. Maximum hours preferred to work? _____ Minimum hours preferred to work? _____

SKILLS SURVEY:

Please rate yourself on the following equipment:

“1” being general knowledge and application; “4” being Proficient

Convection oven	1 2 3 4	Grill	1 2 3 4
Steamer	1 2 3 4	Slicer	1 2 3 4
Commercial mixer	1 2 3 4	Other _____	1 2 3 4

Check which tasks in the Kitchen you are willing to do:

___ preparation of Salad Bar ingredients	___ vegetable preparation
___ Baking	___ Dish Washer
___ Mopping/ Sweeping	___ Cleaning Pots/ Pans
___ Banquet Set-up	___ Banquet Clean-up

What restrictions do you have when it comes to Kitchen work?

For those choosing FACILITY

WORK SCHEDULE SURVEY:

- 1. Days you are available _____
- 2. Hours available those days _____
- 3. Maximum hours preferred to work? _____ Minimum hours preferred to work? _____

SKILLS SURVEY:

Please rate yourself in the following areas:

“1” being general knowledge and application; “4” being Proficient

Carpentry	1 2 3 4	Cleaning	1 2 3 4	Drywall	1 2 3 4
Electrical	1 2 3 4	Excavation	1 2 3 4	HVAC	1 2 3 4
Landscaping	1 2 3 4	Mechanical	1 2 3 4	Masonry/ Concrete	1 2 3 4
Plumbing	1 2 3 4	Painting	1 2 3 4	Sewing	1 2 3 4
Roofing	1 2 3 4	Flooring	1 2 3 4	Tree Trimming	1 2 3 4
Gardening	1 2 3 4	Welding	1 2 3 4	Trail Maintenance	1 2 3 4
Other _____	1 2 3 4				

TOOLS:

- ___ I would be able to provide the tools that are needed for the work I’m doing.
- ___ Shepherd's Spring, Inc would need to provide the tools required for the job.
- ___ I would like to donate the following materials:

Are you able to lift at least 35 lbs? ___ Yes ___ No 50 pounds? ___ Yes ___ No

Do you have any physical limitations that would limit your working on site ___ Yes ___ No

If yes, please explain _____

For those choosing OFFICE/ HOSPITALITY

WORK SCHEDULE SURVEY:

- 1. Days you are available _____
- 2. Hours available those days _____
- 3. Maximum hours preferred to work? _____ Minimum hours preferred to work? _____
- 4. Are you available for an entire weekend shift – Friday 3pm – Sunday 4pm? ___yes ___no

SKILLS SURVEY: Rate yourself in the following areas:

- 1. Relating in a caring, responsible way to guests – working with people
___ Excellent ___ Very Good ___ Average ___ Fair ___ Poor
- 2. Phone etiquette
___ Excellent ___ Very Good ___ Average ___ Fair ___ Poor

3. Organizational skills, including, but not limited to , orderliness, neatness, time management

___Excellent ___Very Good ___Average ___Fair ___Poor

4. Dedication to God, Christian principles and outdoor ministry

___Excellent ___Very Good ___Average ___Fair ___Poor

5. Computer Skills

___Excellent ___Very Good ___Average ___Fair ___Poor

6. Photography Skills

___Excellent ___Very Good ___Average ___Fair ___Poor

7. Audio Visual Equipment use (TV, VCR, DVD, LDC Projector, Interface with computer, sound systems)

___Excellent ___Very Good ___Average ___Fair ___Poor

8. Describe the experiences you have had working with people.

9. Name computer programs that you have used and feel comfortable in using.

10. Describe any emergency preparedness training you've had. (H1N1, disaster training, fire)

For those choosing HEIFER GLOBAL VILLAGE

WORK SCHEDULE SURVEY:

1. Days you are available _____

2. Hours available those days _____

3. Maximum hours preferred to work? _____ Minimum hours preferred to work? _____

SKILLS SURVEY:

1. Describe your group facilitation experience _____

2. Describe your animal care experience _____

3. Describe your travel experience outside the US _____

4. Describe your previous experience with Heifer, International _____

Check which tasks related to the Heifer Global Village you are willing to do:

___ Animal care

___ Garden care

___ Building Maintenance

___ Educational program facilitator

___ Program preparation

___ Group tour facilitator

___ Research

___ Presentations to churches/ groups

Authorization to Check Criminal Records

I, _____, authorize Shepherd's Spring to receive information from any law-enforcement agency, including police departments and sheriff's departments, of this state or federal government, to the extent permitted by state and federal law, pertaining to any convictions I may have had for violations of state or federal criminal laws, including but not limited to convictions for crimes committed upon children. I understand that such access is for the purpose of considering my application as an employee and that I expressly DO NOT authorize Shepherd's Spring, its directors, officers, employees, or other volunteers or staff to disseminate this information in any way to any other individual, group, agency, organization, or corporation. I am aware that a prior conviction will not necessarily bar me from volunteering.

Signed _____ Date _____
(Signature of Applicant)

SS # _____ DL # _____ DOB _____

7. Consent Statement

The information contained in this form is correct to the best of my knowledge. I authorize any references, companies, organizations, or agencies listed to give you any information they may have regarding my character and fitness to work with children and youth. I release all such references from liability for any damages that may result from furnishing such an evaluation to you. I agree to be bound by the policies of Shepherd's Spring, Inc. I authorize Shepherd's Spring, Inc to photograph me and or members of my family and to use such photographs for the purpose of promotion, publicity, historical record, group photos, and the like.

Signature _____ Date _____

Send Completed Application To:
Shepherd's Spring
PO Box 369
Sharpsburg, MD 21782

