



# Rebuilding Lives ~ Restoring Families ~ Renewing Hope

## W4C Volunteer Application pg. 1

Thank you for your interest in volunteering with the W4C organization. Without the generosity of our volunteers, it would not be possible to fulfill the mission God has given us. We thank you for your hard work, commitment, and passion to see lives changed!

Date: \_\_\_\_\_

### Personal Information

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Text? Y N

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Valid Driver's License? Y N

Email address: \_\_\_\_\_ Facebook? \_\_\_\_\_

### Areas of Interest (check all that apply)

#### **Addiction Recovery Team**

- Mentoring/Accountability Partner
- Help with Recovery Classes
- Meals for Jericho House
- Help with transportation

#### **Jackson Hope Center**

- Volunteer Staff—provide onsite support during open hours (general 2 hour shifts)
- Cleaning
- Maintenance/Lawn Care Team

#### **Loved Ones Team**

- Become a Support Partner for others
- Send Cards/Resources to those in need
- Help with Loved Ones Classes

#### **W4C Recovery Campus**

- Land & building prep
- Remodeling/Construction
- Cleaning/Maintenance
- Woodworking/Furniture Shop

#### **Life Recovery and/or Weekend Services**

- Welcome Team
- Sound Team and/or Praise & Worship
- Meal Prep/Clean Up
- Nursery
- Celebration Station: Children's Team
- The Landing: Teen's Team
- Usher/Security Team
- Café Connection Team

#### **Other**

- Graphic Design (flyers/ads)
- Marketing/Website
- Fundraising Team
- Other: \_\_\_\_\_



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## W4C Volunteer Application pg. 2

### ***Volunteer Information***

Please describe any experience (personal and/or professional) you have in the volunteer areas you are interested in: \_\_\_\_\_

\_\_\_\_\_

Please describe the amount of time/days/frequency you are available to volunteer: \_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a felony? Y N If yes, please list date of crime and description of conviction: \_\_\_\_\_

\_\_\_\_\_

Please describe how you have been impacted by addiction: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have a relationship with Jesus Christ? \_\_\_\_\_

If so, in your own words, please briefly describe your relationship with Jesus Christ: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe your desire to volunteer with W4C: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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— rebuild • restore • renew —

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## W4C Volunteer Application pg.3

**NOTE: W4C is an addiction recovery organization and all staff and volunteers may be drug tested at any point. Volunteers may also be asked to comply with a background check as part of the volunteer process.**

⇒ **Do you give permission to W4C staff to conduct drug test/screens as part of the volunteer process? Yes or No**

⇒ **Do you give permission to W4C staff to conduct background checks as part of the volunteer process? Yes or No**

**Due to the nature of the W4C organization and it's stance against drugs and alcohol, volunteers representing the organization agree to live and promote a drug and alcohol free lifestyle.**

By signing below, I, \_\_\_\_\_, agree to comply with all W4C Volunteer and Program rules set forth. I understand by not complying with rules as required, I may be discharged from the Volunteer Program. I also agree that all information provided in this application is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return signed applications to W4C, PO Box 56, Jackson, OH 45640 or email to [joyer@w4cHOPE.org](mailto:joyer@w4cHOPE.org). A program representative will contact you once your application has been processed.**