



Embracing Women, Restoring Hope

Application for Overnight & Weekend Volunteer Staff

Please type or print and answer all questions

Name

Date

Mailing Address

Work Phone

Cell Phone

Home Phone

Social Security No.

Email Address

Driver's License No.

Referral

How did you find out about this position? _____

Office Skills

List software programs you have used and your competence with each:



Bookkeeping Skills

Other Skills:

Education:

	High School	College/University	Graduate/Professional
School Name			
City/State			
Years Completed	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree			
Course of Study			
Describe any specialized training, apprenticeships, skills, honors, and extra-curricular activities			

Please take a moment to answer the following questions that will help us evaluate our compatibility.

Ministry Interests/ Church and Spiritual Background

A. Are you currently attending church?

B. If yes, what is the name and denomination of your church?

C. How long have you attended this particular church?



Biographical Information

1. Describe how and when you became a Christian and your personal growth in Christ. Please use a separate sheet.
2. Describe your involvement in church and other Christian service. Please use a separate sheet if necessary.
3. Explain how and why you believe God is leading you to the Potter's Hands Foundation. Describe what you want to accomplish and the vision you have for serving with the Potter's Hands Foundation. Please use a separate sheet if necessary.
4. Please explain your understanding of what it means to set and enforce clear boundaries. Please use a separate sheet if necessary.
5. List participation, memberships, and offices held in associations, organizations, societies, fraternities/sororities, government, sport, and/or other church groups. Also include honors, awards, achievements, and published articles in college or professional publications.



References

Please give names, email addresses, and phone numbers of professional and personal references who may be contacted. If any of the categories do not apply, please substitute an additional name. Please do not include relatives, fiancé, or spouse.

Professional

1. Former/Current Supervisor

_____	_____
Name	Length of Acquaintance
_____	_____
Email Address	Phone No.

2. Former/Current Direct Report (if applicable)

_____	_____
Name	Length of Acquaintance
_____	_____
Email Address	Phone No.

3. Work Peer

_____	_____
Name	Length of Acquaintance
_____	_____
Email Address	Phone No.

Personal

1. Pastor

_____	_____
Name	Length of Acquaintance
_____	_____
Email Address	Phone No.

2. Current Spiritual Leader or Mentor (if other than pastor ie. Bible Study/Small Group Leader)

_____	_____
Name	Length of Acquaintance
_____	_____
Email Address	Phone No.



3. Peer Friend

Name

Length of Acquaintance

Email Address

Phone No.

Employment Experience

Starting with your current or last job, list your past four employers.

Employer	Dates Employed
City/State	Phone No.
Job Title	Work Performed
Reason for Leaving	
Whom should we contact for the reference?	
Contact information (email or phone)	

Employer	Dates Employed
City/State	Phone No.
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Reason for Leaving	
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Contact information (email or phone)	

Evening/Overnight Volunteer staff hours include evenings and weekends. Please mark your availability below.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
4:00 pm - 8:00 am	4:00 pm - 8:00 am	4:00 pm - 8:00 am	4:00 pm - 8:00 am	8:00 am - 4:00 pm	8:00 am - 4:00 pm	8:00 am - 4:00 pm
				4:00 pm - 8:00 am	4:00 pm - 8:00 am	4:00 pm - 8:00 am

I hereby certify that the information contained in this application and any attachments is true to the best of my knowledge and agree to have any of the statements checked by the Potter's Hands Foundation unless I have indicated on the contrary. I authorize the references listed in this application to provide the Potter's Hands Foundation any and all information concerning my previous employment and any pertinent information that they may have. I understand that any misrepresentation, falsification, or material omission of information may result in my failure to receive an offer, or if I am hired, in my dismissal from employment.

Applicant's Signature _____ Date _____

The Potter's Hands Foundation, Inc. | P.O Box 1564 | Corning, NY 14830 | thepottershandsfoundation.org

Please submit your completed application to Deborah Kuehner at deb@tphf.info.