



Love INC  
Love In the Name of Christ

Office use only: Date began _____ Position _____
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# VOLUNTEER APPLICATION

Hours: 9 am – 3 pm  
Monday - Thursday  
Friday: 9am – 12 Noon

NAME \_\_\_\_\_ Phone: \_\_\_\_\_ E Mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place \_\_\_\_\_

What Church do you attend? \_\_\_\_\_

Member? \_\_\_\_\_ How many years \_\_\_\_\_

Pastor's Name \_\_\_\_\_

Three References, NOT family or Pastor (Pastor will be contacted)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Reason for  
Volunteering \_\_\_\_\_  
\_\_\_\_\_

Marital Status \_\_\_\_\_

Education \_\_\_\_\_

Brief employment history \_\_\_\_\_  
\_\_\_\_\_

Military Service ? \_\_\_\_\_ yes \_\_\_\_\_ no

What are your interests/hobbies \_\_\_\_\_  
\_\_\_\_\_

Have you ever had experience with any of the following? (if so, please explain on the back)

- \_\_\_\_ Mental health problems and/or treatment
- \_\_\_\_ Drug or alcohol abuse and/or treatment
- \_\_\_\_ Domestic violence





I authorize Love INC to make a 10-year Washington State criminal history check on me.

Volunteer's Name \_\_\_\_\_  
Last First Middle

Alias/Maiden Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_