

Spiritual Care Service Volunteer Application

Maple Knoll Communities, Inc.

Spiritual Care Services, 11200 Springfield Pike, Cincinnati, Ohio 45246, 513-782-4327

Position Applied For: **Chaplain Aide (Layperson)** _____
 Chaplain Assistant (Ordained Clergy) _____
 Chaplain Intern (Student) _____
 Compassionate Companion (Layperson) _____

Date: _____

Name: _____ **Phone:** _____

Address: _____

Have you lived at this address for the past 5 years? _____ Yes _____ No

If no, please list your addresses for the past 5 years:

E-Mail: _____

Marital Status: _____ **Month/Date of Birth:** _____

Have you ever been convicted of a felony? _____ Yes _____ No

If yes, where, for what, and give dates: _____

Are you currently a volunteer? _____

Religious Background:

Religious affiliation/preference: _____

Name of local faith community: _____

Address of place of worship: _____

Phone of faith community _____ **Internet Website:** _____

Pastor's Name: _____

Faith Community Involvement: _____

Pastor's Letter of Recommendation: _____ Yes _____ No

Work Background:

Currently working? _____ Yes _____ No

How long since you last worked? _____

Type of work performed: _____

Most recent employer: _____

Education Background:

Highest level accomplished: _____

Special training: _____

Religious Education: _____ Yes _____ No

Where? _____

Pastoral Visitation Training? _____ Yes _____ No

Where? _____

When? _____

Availability:

In order to properly assign you a work area, we need to be aware of any physical limitations:

Are you a full year Greater Cincinnati/Oxford Area resident? _____

When can you begin training? _____

Days Available: (Please circle) S M T W Th. F Sa

Times Available: 8:30 AM to 12:30 PM _____

 12:30 PM to 4:30 PM _____

 4:30 PM to 8:30 PM _____

Life Experience:

What life crisis or significant losses have you encountered within the last five years?

Why do you want to serve in Spiritual Care Services as a Chaplain volunteer?

What are your specific Pastoral skills?

What special skills do you have (typing/computer, technical, medical, etc.):

APPLICANT STATEMENT

1. I hereby certify that all responses set forth during my volunteer application process are true and complete. My signature also authorizes Maple Knoll Communities, Inc. or its authorized agents to conduct a thorough investigation of all statements, written and oral, made by me during the volunteer application process, including without limitation, information concerning my prior employment positions, and educational background. I hereby authorize all persons, companies or other entities connected with any such informational request, including without limitation, physicians, hospitals, prior employers, and law enforcement agencies to provide any and all information and/or medical records they may have regarding me or my employment. I release and agree to indemnify Maple Knoll Communities, Inc., its authorized agents, and its employees, and all other persons, companies, and other entities from any and all liability arising out of such investigation, including without limitation any liability for furnishing information or for taking any action based on information provided.
2. I understand and agree that any falsification, misrepresentation, or omission either on the volunteer application form or in my responses to questions asked during the interviewing or examination process may disqualify me from further consideration for volunteering or if employed by Maple Knoll Communities, Inc., will subject me to immediate termination, whenever the falsification or omission is discovered. In this regard, where an item is left blank on the employment application, it is because there is no information within its scope.
3. I understand and agree if I am employed by Maple Knoll Communities, Inc. my volunteer status is at-will so that I may terminate my volunteer status at any time and for any or no reason. Likewise, Maple Knoll Communities, Inc. can terminate my volunteer status at any time, with or without notice, and for any or no reason. I also understand and agree that nothing contained in Maple Knoll Communities, Inc. volunteer application or in the granting or conducting of an interview or anything set forth in any oral or written statement, communication, or policy now or in the future constitutes or is intended to constitute or to create a contract between me and Maple Knoll Communities, Inc. for either volunteer status. No promises regarding volunteer status have been made to me and I understand and agree that no such promise or guarantee is binding on Maple Knoll Communities, Inc. unless they are expressed promises, made in writing, and signed by the Director of Spiritual Care & Ethics Services or the Director of Volunteer Services.
4. I will agree to abide by the policies and procedures of Maple Knoll Communities, Inc., and the Spiritual Care Services Department including attendance at the regular in-service training sessions

Applicant's Signature

Date

