

# Ally Ministry Application

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## Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

## Availability

In general, during which hours are you available for volunteer assignments?

- Weekday mornings       Weekend mornings  
 Weekday afternoons       Weekend afternoons  
 Weekday evenings       Weekend evenings

## Interests

Why are you interested in becoming an Ally Minister?

## Special Skills or Qualifications

Summarize any special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports that may be relevant to the Ally Ministry. Please note: No special skills or qualifications are necessary to be an Ally Minister.

### Previous or Current Ministry Experience

What other ministries have you been involved in (past and present)?

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### Agreement and Signature

I understand that I am applying to be considered as a ministry volunteer. If accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application or future materials may result in my immediate dismissal. As an Ally Minister, I will be working 1:1 with adults and I am responsible for maintaining strict confidentiality in all ministry situations.

I also agree, by signing, that I am willing to complete a full background check. Results of background checks may not necessarily eliminate me from eligibility as an Ally Minister, but to protect care receivers and Crossview Church, I give Crossview Church permission to complete a background check (separate document to be signed).

Name (printed)	
Signature	
Date	

Thank you for completing this application form and for your interest in volunteering with us.

Please turn this application in to Jen Oswald, Director of Cares and Outreach