

# **DYNAMIC LIFE CLUB**

## **Application Packet**

---

**Please complete all sections of the application:**

- Volunteer Application
- Statement of Faith
- Acknowledgement
- Background Investigation Consent
- Three Confidential Recommendations
- Volunteer and Personnel Training Policies and Safety Standards

**Please return the completed application to Dynamic life Club. We appreciate your interest in Dynamic Life Clubs**

# Volunteer Application

Date: \_\_\_\_\_ Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

DLC location that you would like to volunteer: \_\_\_\_\_

## Employment History/Education History

Highest level of education:  high school  associate's degree  bachelor's degree  graduate degree

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_ How long? \_\_\_\_\_

## Faith Background Information

Do you attend church:  Yes  No

What church do you attend? \_\_\_\_\_ Are you a member:  Yes  No

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please describe when and how you became a Christian: \_\_\_\_\_

Please list 3 references that may be contacted as part of the application process:

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone number: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone number: \_\_\_\_\_

3. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone number: \_\_\_\_\_

## Criminal and Disciplinary Record

Have you ever been convicted of a crime or violation other than a minor traffic infraction?  Yes  No

Have you ever been suspended or terminated from a volunteer position before?  Yes  No

Have you ever engaged in, been suspected of, or charged with child abuse or neglect, or sexual misconduct of any nature?  Yes  No

If yes, to any of the above please explain: \_\_\_\_\_

Our mission is to provide support, love, and Godly guidance to teens and families. In order to uphold a standard of excellence, we require a background check of all volunteers and personnel. Please sign below to indicate your consent to a background check, as well as permission to contact the 3 references listed above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Statement of Faith

1. I believe the Bible is the inspired, the infallible authoritative Word of God.
2. I believe that there is one God, eternally existent in three persons: Father, Son and Holy Spirit.
3. I believe in the deity of our Lord Jesus Christ, His virgin birth, His sinless life, His miracles, His vicarious and atoning death through His shed blood, His bodily resurrection, His ascension to the right hand of the Father and His personal return in power and glory.
4. I believe that for the salvation of lost and sinful people regeneration by the Holy Spirit is absolutely essential.
5. I believe that Christians are enabled to live a Godly life by the present ministry of the indwelling Holy Spirit.
6. I believe in the resurrection of both the saved and the lost; they that are saved unto the resurrection of life with Jesus Christ, and they that are lost unto the resurrection of damnation.
7. I believe in the spiritual unity of believers in Christ Jesus.

I agree with and will adhere to the above Statement of Faith.

---

Print Name

---

Signature

---

Date

## Acknowledgment

I certify that the statements I have made are true and correct.

I understand that if accepted as a volunteer, I will be required to be bound by all of the policies, standards or regulations as established from time to time.

I authorize and will agree to cooperate in investigation into any information provided in this application. I further recognize and agree that, as a condition of acceptance as a volunteer, I consent to criminal, financial and motor vehicle background checks from federal, state and local agencies.

I hereby release Dynamic life Club and all persons supplying information from all liability, claims for damages or responsibility whatsoever with respect to information supplied. I further authorize my current employer and references to speak freely to Youth Connections for Christ representatives and provide whatsoever information is required.

---

Print Name

---

Signature

---

Date

## Background Investigation Consent

I, (printed name) \_\_\_\_\_, hereby authorize Dynamic Life Club and its agents to make an independent investigation of my background, references, character, past employment, education, credit history, criminal or police records, and motor vehicle records for the purpose of confirming the information contained on my application and/ or obtaining other information which may be material or my qualifications for service now and, if applicable, during the tenure of my service with Dynamic Life Club.

I release Dynamic life Club and/ or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regard to the information obtained from any and all of the above referenced sources used. The following is my true and complete legal name and all the information is true and correct to the best of my knowledge:

Print Full Name: \_\_\_\_\_

Maiden Name or Other Names Used: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of License: \_\_\_\_\_

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

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

How long have you lived at the current address? \_\_\_\_\_

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

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

Please list all states of residence since age 18? \_\_\_\_\_

**I understand that the above information is required for identification purposes only and is in no manner used as qualification for employment, internship, or service as a volunteer. Dynamic Life Club abides by all state and federal employment laws.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Confidential Recommendation**

To be completed by applicant: Name of Applicant: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I waive the right to view this recommendation. Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_ Name of Recommender: \_\_\_\_\_ Relationship with Applicant: \_\_\_\_\_

The applicant is being considered for a volunteer position with Dynamic Life Club. Please complete the following questions based on your personal experiences with the applicant.

Rate the applicant on the following qualities:

Quality	Excellent	Good	Average	Fair	Poor	Unsure	Comments
Compassion							
Integrity							
Spiritual Maturity							
Generosity							
Communication							
Leadership							
Organization							
Reliability							
Trustworthiness							
Creativity							
Cooperation							

What are the applicant's greatest strengths? \_\_\_\_\_

What are the applicant's greatest weaknesses? \_\_\_\_\_

Please provide any additional comments about the applicant: \_\_\_\_\_

I recommend the applicant: \_\_\_ Very Strongly \_\_\_ Strongly \_\_\_ Hesitantly \_\_\_ Reluctantly

Recommender's Signature: \_\_\_\_\_