



Life Pregnancy
center

because your life matters

Volunteer Application

Date: _____

Full Name: _____
Last First Middle Initial

Address: _____
Number & Street City State Zip code

Phone #: _____ Email: _____

Are you over 18 years old? Yes No Date of Birth: __/__/_____

Have you ever been convicted of a crime? Yes No

If yes, explain:

Education:

High School / GED School Name: _____

Number of Years completed (*circle one*) 1 2 3 4 Diploma: Yes No G.E.D.: Yes No

College / Vocational School:

Number of Years completed (*circle one*) 1 2 3 4 5 6 7

School(s) _____ Address _____

Major _____ Degree Earned (Dates) _____



Describe other training or degrees:

Previous Volunteer Experience:

List most recent volunteer experience first.

Organization _____ Date of Service: From _____ To _____

Address _____

Position/Duties _____

Telephone _____ Supervisor's Name _____

Organization _____ Date of Service: From _____ To _____

Address _____

Position/Duties _____

Telephone _____ Supervisor's Name _____

Organization _____ Date of Service: From _____ To _____

Address _____

Position/Duties _____

Telephone _____ Supervisor's Name _____



Employment History:

List most recent employment first.

Employer _____ Date of Employment: From _____ To _____

Address _____

Position/Duties _____

Telephone _____ Supervisor's Name _____

Employer _____ Date of Employment: From _____ To _____

Address _____

Position/Duties _____

Telephone _____ Supervisor's Name _____

Employer _____ Date of Employment: From _____ To _____

Address _____

Position/Duties _____

Telephone _____ Supervisor's Name _____

Employer _____ Date of Employment: From _____ To _____

Address _____

Position/Duties _____

Telephone _____ Supervisor's Name _____



Additional Information:

What is your reason for seeking to volunteer here?

Faith Information:

Please provide the following information concerning your local church.

Church name _____ Denomination _____

Address _____

Pastor's Name _____ Phone _____

Ministries / Positions you have served: _____



LPC is a Christian pro-life ministry. We believe that our faith in Jesus Christ empowers us, enables us, and motivates us to provide pregnancy services in this community. Please write a brief statement about how your faith would affect your volunteer work at this center.

Personal Information:

What special skills, talents, gifts, or personality traits would you bring to this ministry?

Have you ever counseled a woman who was considering an abortion? _____Yes _____No

(Explanation)_____

Have you had any traumatic experiences relating to abortion? _____Yes _____No

(Explanation)_____

Have you ever known a single pregnant woman? _____Yes _____No

(Explanation)_____



Under what circumstances would you consider abortion as an alternative for a woman with an unplanned pregnancy?

- _____ Never an option
- _____ In cases of rape or incest
- _____ In cases where the mother's life was in extreme peril
- _____ In cases of extreme psychological distress
- Other (specify) _____

Please list any books, films, or other material that you have read or viewed that relate to abortion, pregnancy, or alternatives to abortion.

How would you rate yourself in the following areas?

Knowledge of abortion methods	excellent	good	fair	poor
Knowledge of current laws concerning abortion	excellent	good	fair	poor
Knowledge of what the Bible teaches about abortion	excellent	good	fair	poor

Are you currently or have you ever been involved in seeking to adopt a child? _____Yes____No

(Explanation)_____



What do you consider to be your possible areas of weakness?

Are there any particular personality types with whom you have difficulty working?

References:

Please list persons who are not related to you and who have known you for at least two years, including your pastor.

<i>Name</i>	<i>Address</i>	<i>Phone #</i>	<i>Years acquainted</i>	<i>Relationship</i>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

(Continue to next page)



Applicant's Certification and Agreement

I certify that the facts set forth in this volunteer application are true and complete to the best of my knowledge, and I authorize the pregnancy center to verify their accuracy and to obtain reference information concerning my character and capabilities.

I release the pregnancy center and any person or entity providing such reference information from any and all liability relating to the provision of such information or relating to any decisions made based upon such information. I give permission to the center to conduct a criminal background check to the extent that my volunteer duties may involve direct interaction with minors.

If I become a volunteer at the pregnancy center, I agree to fully adhere to its policies and rules, including those rules relating to maintaining client confidentiality.

I recognize that, as a volunteer, I will serve in a different role than the employees of the pregnancy center, and I am not seeking, nor expecting to receive, any compensation or other benefits in return for any volunteer services which I may provide for this ministry.

I further certify that I have read and that I am in full agreement with the pregnancy center's Code of Conduct, Core Values, Vision and Mission Statement, Statement of Faith.

Signature of Applicant _____ Date _____

(Continue to next page)



Life Pregnancy Center

Statement of Belief For Potential Volunteers

To be completed before reviewing Statements

Applicant:	Date:
Who is Jesus Christ?	
How does one become a Christian?	



What does it mean to be born again or to be born of God as mentioned in Bible passages such as John 3:3-8 and 1 John 3:9 and 5:1,4?

Do you have assurance that you are going to Heaven when you die? For what reason?

If you stood before Christ and He asked "For what reason should I let you into Heaven?" what would be your response?

Describe your daily personal relationship with the Lord.

Please describe in detail your personal salvation experience, covering these areas:

Your life before becoming a Christian



How you became a Christian?

Describe the changes in your life after you became a Christian.

Please read all of the LPC statements, then indicate whether you agree or disagree with them.

I agree I disagree

If you disagree with the statement(s), please indicate how you disagree

Signature:

Date:

Staff Signature:

Date:



Commitment to Godly Conduct

“Let us not lose heart in doing good, for in due time we will reap if we do not grow weary.” - Galatians 6:9

1. I have accepted Jesus Christ as my Savior and Lord and am attending church regularly. I am also involved in spiritual growth with other Christians (e.g. a Christ-centered, accountability relationship, Bible study, or a Sunday school class.) I am in agreement with the Life Pregnancy Centers Statement of Faith. I am in complete agreement with the policies, procedures, and philosophy of Life Pregnancy Center (LPC). I have read and agree with the Mission Statement and Core Values.
2. I promise to live above reproach and within biblical standards of sexual conduct for my marital status. As a single person, I will live a sexually abstinent lifestyle and state that I have been sexually abstinent during the past twelve months, and do not and will not reside with the opposite sex. As a married person, I will not participate in extramarital sex and state that I have not participated in infidelity during the last 12 months. As a married or single person, I promise not to engage in any homosexual activity.
3. While serving as an employee, if I am hired, I will not participate in any abortion related picketing, protesting, sidewalk counseling, or rescues. (Life Rally is an acceptable activity.) I will not intentionally endanger LPC’s clients, volunteers, staff, facilities or reputation.
4. I believe I can minister to clients regardless of race, religion, nationality, age, marital status, sexual preference, or financial status.
5. I agree with the biblical principle of the sanctity of human life and agree with the LPC’s policy of not referring a client for an abortion or abortifacients. I understand that LPC does not recommend, provide, or refer single women for contraceptives. LPC is committed only to providing its clients with accurate and complete information about both prenatal development and abortion.
6. I will ask about things I don’t understand and offer suggestions if I become aware of problems. In this way I will help LPC improve. I will not knowingly or intentionally misrepresent LPC’s policies and procedures and will not speak on behalf of LPC without proper training and clearance.
7. I acknowledge that the goal of ministering is to honor God as I serve Him.
8. I recognize that God is as interested in transforming my life through the work of LPC as He is in the salvation and transformation of the women and men who come to the center. I recognize that God will use LPC to rework the priorities of my life, test and strengthen me, and reshape my relationships.

Signature _____

Date _____



Life Pregnancy center

Core Values

1. We believe in reflecting Christ in all we do, adhering to the biblical stewardship of all our resources.
2. We believe in the sanctity of and reverence for human life; all life is created by God and is therefore valuable from conception until natural death.
3. We believe in serving our clients regardless of their race, creed, color, religion, national origin, gender, age, disability or marital status.
4. We believe that the term “marriage” has only one meaning: the uniting of one man and one woman in a single, exclusive union, as delineated in Scripture. (Genesis 2:18-25)
5. We believe in biblically based relationships including the value of premarital sexual abstinence, marriage, and physical and emotional marital fidelity.
6. We believe in presenting the love of Christ through word and deed.
7. We believe Volunteers and Staff must proclaim Christ and have received him as their Lord and Savior.
8. We do not believe in recommending, providing for, or referring for abortion or abortifacients, nor do we believe in recommending, providing or referring single women for contraceptives.
9. We believe in offering assistance free of charge whenever possible.

I agree to abide by these Core Values.

Signature _____

Date _____



Life Pregnancy center

Vision Statement

Our vision is a culture where lives are transformed by the Gospel of Jesus Christ and all people acknowledge that life begins at conception and choose life for the unborn.

Mission Statement

LPC 's mission is to affirm life through evangelism, education, counseling and practical assistance.

Statement of Faith

1. We believe the Bible to be the inspired, infallible, authoritative Word of God.
2. We believe that there is one God, eternally existent in three persons: Father, Son and Holy Spirit.
3. We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right-hand of the father and in His personal return in power and glory.
4. We believe that for the salvation of lost and sinful man, regeneration by the Holy Spirit is absolutely essential, and that this salvation is received through faith in Jesus Christ as Savior and Lord and not as a result of good works.
5. We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life and to perform good works.
6. We believe in the resurrection of the saved and the lost; they that are saved unto the resurrection of life and they that are lost unto the resurrection of damnation.
7. We believe in the spiritual unity of believers in our Lord Jesus Christ.



Pastor Referral Letter & Form

Dear Pastor:

We at Life Pregnancy Center (LPC) would like you to be aware that _____ is applying to volunteer at LPC.

We are committed to Christian character and integrity in this ministry and believe that involvement in a local church is essential to each Christian's continuing growth and support. Because of the life and death issues we address, all involved in this ministry are on the front lines of spiritual warfare.

Because of this battle, we would greatly appreciate your input on this potential volunteer staff member who is under your spiritual covering. A prompt reply will be truly appreciated, since your insight is so important to us in the necessary screening process.

We do not release a new volunteer staff member to counsel clients until we have heard from you. If you have not had the opportunity to become personally acquainted with this individual, you may refer this questionnaire to another pastoral staff member or church leader who does know her.

Would you recommend the person based on the following criteria?

- 1) *Lordship*: The person's life reflects a commitment to Jesus Christ as Lord by adherence to the Bible and its principles; she is growing in her Christian walk.
- 2) *Commitment to a local church as evidenced by the following*:
 - a. She is a member or regular attendee of the local church in good standing.
 - b. She is faithful in church attendance.
 - c. She attends a Bible study, cell group, Sunday School class, or other small group.
- 3) *Stability within the home*: Whether the volunteer is single, separated, divorced, widowed or married, our concern is that the applicant would have a stable base so that ministry with LPRC would not strain the individual, her home, or relationships within the home.
- 4) *What is your impression of her maturity level? Dependability? Self-discipline?*
- 5) *What reservations, if any, would you have in recommending this person for LPC ministry? Please explain.*

We would appreciate your response to these five points, to the best of your knowledge, on the next page. Thank you for your assistance.



Pastoral Referral

For Applicant: _____

1) Lordship:

2) Church commitment:

3) Home life:

4) Personal character:

5) Any reservations?



Pastor's Name: _____ Date: _____

Church: _____

Address: _____

Phone: _____

Please mail your reply to:

Laura Christensen

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Chino Valley, Arizona 86323

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