



Christian Caring Center

378 Lakehurst Road
Browns Mills, NJ 08015

609-893-0700

WWW.CHRISTIANCARINGCENTER.NET

Dear Prospective Volunteer,

The Christian Caring Center has been in existence since 1983. Our mission has always been to share the message of salvation with everyone and support each person's growing relationship with Jesus Christ, and to assist in the prevention and remediation of homelessness; provide food, clothing, and other survival necessities as we are able.

Enclosed you will find information regarding requirements needed to become a Christian Caring Center volunteer and a volunteer application. Please PRINT or TYPE your information on the application form. The application can be returned online, in person, or by mail.

A screening interview will be required before you can begin work as a volunteer. We will contact you to arrange a mutually agreeable appointment time. Please bring a copy of your resume with you to your interview. We will also be performing a reference and criminal background check.

We understand that the process of becoming a volunteer takes time, but it is a very worthwhile endeavor. If you have any questions regarding the volunteer application process, please contact the Center at (609) 893-0700 or email us at christiancaringcenter@yahoo.com. We look forward to having you as a volunteer.

Thank you for your interest.

Sincerely,

Madelyn Mears-Sheldon

Madelyn Mears-Sheldon
Executive Director

VOLUNTEER REQUIREMENTS

Minimum Age: All age groups are welcome to volunteer. Volunteers under the age of 18 must be accompanied by a parent while doing their volunteer service at the Center.

Processing Required: Prospective volunteers must complete a volunteer application. The application must be completed in its entirety, including references.

Interview(s): A screening interview will be conducted with the Center. Applicants are met, reviewed, and considered based on skills, interests, and availability of volunteer positions. A reference check and criminal background check will be conducted. When these checks have been successfully completed, the prospective volunteer will be contacted to arrange a work schedule.

Training: Once the application, interview, and background checks have been completed, the volunteer will receive job shadowing/training in the area that best suits the needs of the volunteer and the Center. The training process is not timed and the volunteer will remain in job shadowing/training until they have a reasonable comfort level with their new position.

Attendance: All volunteers are expected to be at the Center at their scheduled times. It is very important that the Center is staffed properly in order to meet the needs of its clients. A commitment to volunteer should be viewed in the same way as a commitment to a paid position. If you are unable to report at your assigned time, you must call the Center to notify us of your absence as soon as possible. The Center reserves the right to terminate volunteers who do not follow this practice.

Confidentiality: Volunteers at the Center may have access to client's personal information. Information should only be shared with the Executive Director, Programs Manager, or Case Manager. Under no circumstances should any of this information be shared with anyone outside of the Center.

Evaluation: The Center reserves the right to evaluate a volunteer's performance and reassign them to a different volunteer position if the volunteer does not demonstrate a good understanding of the assigned tasks.

CHRISTIAN CARING CENTER

VOLUNTEER APPLICATION

Last Name _____ First Name _____ Middle Initial _____

Street Address/Apt. # _____ City/State/Zip _____

Home Telephone # _____ Cell Phone # _____ Email Address _____

Social Security Number _____ Occupation/Academic Major _____

Emergency Contact Name/Relationship/Address/Telephone # _____

Are you at least 18 years of age? Yes No

How did you hear about us? _____

Have you ever been convicted (found guilty) of a crime? Yes No

If yes, please explain _____

Do you have any special needs to consider? _____

Are there any duties (such as lifting) that you have been advised NOT to do? Yes No

If yes, what are your restrictions? _____

Certifications and Memberships (e.g. First Aid, CPR) _____

If you speak any language(s) other than English, please list them here: _____

Is there anything else that you would like us to know about you? _____

Please give a brief statement of your faith and tell us a little bit about your previous ministry/service experience.

Are you regularly attending a church? If so, where? _____

What spiritual gifts do you believe apply to you? (check all that apply)

Apostleship _____ Teaching _____ Hospitality _____ Evangelism _____ Shepherding _____

Wisdom _____ Encouragement _____ Discernment _____ Interpretation _____ Healing _____

Government _____ Helps _____ Mercy _____ Faith _____ Knowledge _____ Tongues _____

Miracles _____ Other _____

When are you able to begin your volunteer service? _____

How much time are you willing to commit to this ministry? _____

When are you available? _____

Why are you interested in volunteering at the Center?

_____ Academic Credit/Experience

_____ To gain employment skills

_____ To share my skills

_____ To support the Christian Caring Center

_____ Other

What would you like to gain from volunteering? _____

Please list any special qualifications/skills that you can bring to our program: _____

Have you ever volunteered before? Yes No

Please describe your previous volunteer experience (Organization Name/Position/Dates of Service)

Which of the following volunteer activities interest you? (check all that apply)

Administrative/Office Assistant _____ Bridge of Hope Support Board _____ Client Interviewing _____

Building & Grounds Maintenance _____ Building Construction/Renovation _____ Cleaning _____

Driving _____ File Maintenance _____ Food Transporter _____ Fundraising _____ Gardening _____

Group Leadership _____ Handyman _____ Helping at Events _____ Housekeeping _____ IT Support _____

Interpreter _____ Journalism _____ Management _____ Mentoring Shelter Residents _____ Training _____

Office Equipment Maintenance _____ Pantry Stocking/Inventory _____ Party/Event Planning _____

Photography _____ Public Speaking _____ Receptionist/Data Entry _____ Thrift Shop _____

Vehicle Maintenance _____

Please provide information about your work experience, starting with your current (or most recent) employer.

Employer: _____ Dates of Employment: _____

Address: _____

Phone Number: _____ Title: _____

Reason for Leaving: _____

Description of Duties: _____

Employer: _____ Dates of Employment: _____

Address: _____

Phone Number: _____ Title: _____

Reason for Leaving: _____

Description of Duties: _____

Please provide two references:

Full Name: _____ Relationship: _____

Company: _____ Phone Number: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone Number: _____

Address: _____

Once you have completed this form, please save to your PC and please email it to us at christiancaringcenter@yahoo.com

By signing below, I am voluntarily agreeing to take part in the activities at the Christian Caring Center. I hereby confirm that the information I have provided is true and may be verified.

Signature: _____ Date: _____

