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[www.generationsadoptions.org](http://www.generationsadoptions.org)

## VOLUNTEER APPLICATION Generations Adoptions

**Please print**

Full Name \_\_\_\_\_

Address \_\_\_\_\_ City, State Zip \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

SSN#: \_\_\_\_\_ Are you over 18? \_\_\_ yes; \_\_\_ no Date of Birth: \_\_\_/\_\_\_/XXXX

Have you ever been convicted of a crime? \_\_\_ Yes \_\_\_ No If yes, explain: \_\_\_\_\_

Circle day of week you can volunteer: Monday Tuesday Wednesday Thursday Friday

We are open 9 a.m. – 5 p.m. What hours can you volunteer? \_\_\_\_\_

Please check your areas of interest below:

*In our office:*

- |  |   |
|--|---|
| <input type="checkbox"/> answer phones                           | <input type="checkbox"/> clerical work (computer, typing, filing, projects) |
| <input type="checkbox"/> work with clothing, baby supplies       | <input type="checkbox"/> speak Spanish (interpret or translate forms)       |
| <input type="checkbox"/> run errands                             | <input type="checkbox"/> work on special events like our Hope Gala          |
| <input type="checkbox"/> creative – scrapbooking, bulletin board | <input type="checkbox"/> special projects – call me when needed.            |
| <input type="checkbox"/> baking for classes and events           | <input type="checkbox"/> video classes or events or take photos             |

*Providing Housing:*

- Foster Parent (training required) – providing housing and care for a newborn or child (0-4 yrs) awaiting placement in adoptive home. Average stay ranges from 2 days – 2 months.
- Foster Parent for pregnant adolescents. Provide housing and care for pregnant teen during pregnancy and up to six weeks after birth of child.
- Extended Family for pregnant women over 18 years of age. Provide housing and care for pregnant women during pregnancy and up to six weeks after birth of child.

*Other areas of service:*

- Provide transportation to birthmoms to their medical appointments, school, job, counseling at Generations, etc.

\_\_\_\_\_ Be available to give your testimony to potential adoptive families and birthmoms considering adoption. My testimony is:

\_\_\_\_\_ placed a child for adoption \_\_\_\_\_ an adopted child myself \_\_\_\_\_ an adoptive parent

Education \_\_\_\_\_

Previous Volunteer Experience: \_\_\_\_\_

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Present Employment \_\_\_\_\_

**Additional Information:**

1. What is your reason for seeking to volunteer here? \_\_\_\_\_

\_\_\_\_\_

2. Do you consider yourself a Christian? \_\_\_ Yes \_\_\_ No If yes, how long have you been a Christian?

\_\_\_\_\_

3. As a Christian, what is the basis of your salvation? \_\_\_\_\_

\_\_\_\_\_

4. Please provide the following information concerning your local church.

Church \_\_\_\_\_ Address \_\_\_\_\_

5. This organization is a Christian ministry. We believe that our faith in Jesus Christ empowers us, enables us, and motivates us to provide adoption services in this community. Please write a brief statement about how your faith would affect your volunteer work at this agency.

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

7. Have you ever known a single pregnant woman? \_\_\_ Yes \_\_\_ No

(Explanation) \_\_\_\_\_

8. Have you ever know a woman who placed for adoption? \_\_\_ Yes \_\_\_ No

(Explanation) \_\_\_\_\_

9. Are you currently or have you ever been involved in seeking to adopt a child?    \_\_\_ Yes    \_\_\_ No

(Explanation)\_\_\_\_\_

10. What do you consider to be your possible areas of weakness?\_\_\_\_\_

11. 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 or college pastor.

|    | Name  | Address | Phone # | Years acquainted | Relationship |
|----|-------|---------|---------|------------------|--------------|
| 1. | _____ | _____   | _____   | _____            | _____        |
| 2. | _____ | _____   | _____   | _____            | _____        |
| 3. | _____ | _____   | _____   | _____            | _____        |

**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 agency to verify their accuracy and to obtain reference information concerning my character and capabilities. I release the agency 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 agency to conduct a criminal background check to the extent that my volunteer duties may involve direct interaction with clients. If I become a volunteer, 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, 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 attached Statement of Faith.

Name of applicant\_\_\_\_\_ Date\_\_\_\_\_

Signature: \_\_\_\_\_