



RESTORATION
ACADEMY

Volunteer Application

Restoration Academy is grateful that you are interested in volunteering at our school. Volunteers are an important part of the community at RA. In order to get to know you and your volunteer interests a little better it is important that you fill out the application below. Once your application is processed, a member of the administration will communicate with you regarding your volunteer placement.

Date: _____

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Primary Phone: (_____) _____

E-mail: _____

What is the best time to reach you?

- Weekdays Weekends
 8 am - 5 pm 6 - 8 pm

Church: _____ City: _____

Current Employment: _____ Title: _____

Direct Supervisor: _____ Phone: (_____) _____

Hobbies / Interests? _____

Areas of Expertise? _____

In what area(s) are you interested in volunteering?

- Administrative
Clerical Support, Librarian Assistant, Computer Lab Assistant
- Tutoring
- Extra-Curricular
Arts instruction, Athletics, Chaperone excursions
- Ministry
Chapel Leaders, Small Group Leaders, Counseling, Mentoring
- Building and Grounds
- Hospitality
Meals, Events, Special school-wide events

References

Please provide a list of references - one personal (non-related), two professional - which you will allow us to contact:

Name: _____

Relationship to You: _____ Phone: (____) _____

personal professional

Name: _____

Relationship to You: _____ Phone: (____) _____

personal professional

Name: _____

Relationship to You: _____ Phone: (____) _____

personal professional

Have you ever been accused or convicted of a felony?

yes no

Have you ever been accused or convicted of physically or sexually harming a minor?

yes no

Have you ever been accused or convicted of sexual harassment, sexual abuse or sexual misconduct?

yes no

If you answered yes to any of these questions, please explain: _____

Are you willing to submit to a Background Check? yes no

Have you ever volunteered with Restoration Academy? yes no

Volunteer Service Hours

Would you like the time you volunteer to be recorded for service hour credits with your school, college or place of employment? yes no

If yes, please indicate where the letter should be sent including contact name and full mailing address (or if you have a form needing to be filled out, please attach it to this application**): _____

** if you are attaching a service hour form, please note that we will keep a copy on file so that you can request submission to your school, college or place of employment as needed each time you volunteer.