

## ST BARNABAS PARISH VOLUNTEER INFORMATION FORM

Name of Applicant:			
Street Address :			
City:	State:	z	Cip:
Home Phone:		Cell Phone:	
Email Address:		Driver's License:	
Check Age Group: 17 & Under	18-25	26 +	
Volunteer activities for which	you are applying (i.e	a., catechist, usher, carni	ival, room mother, etc.):
List any previous experience a	s a Parish/School Vo	lunteer: (include dates,	position and location):
Dates Volunteered	Position	Parish/School	ol
Dates Volunteered	Position	Parish/Schoo	ol .
Are you listed in VPIN (Volunt Angeles? Yes: No:	eer and Personnel In	formation Network) for	the Archdiocese of Los
If yes, please list parish/school	site where your info	rmation was entered:	
(Name of Parish or School)	(City	)	(Region)
Completed Safe Environment	Training for Adults (	Check all that apply):	
VIRTUS® Protecting God's Chi	ildren Adult Awarene	ess Certificate on file:	[ ] Year
VIRTUS® Keeping the Promise	Alive Recertification	Certificate on file:	[ ] Year
Fingerprinting on file with Archdiocese of Los Angeles:			[ ] Year

Years a Member of Parish/School and	I Reference	
How many years have you been a mer	mber of the parish or school:	
Name of a reference who is a member	of the parish or school:	
Name	Parish/School	
Complete Address and Phone No(s).		
Special Considerations/Emergency Co	ontact Information	
Do you have any special considerate volunteering functions?	tions which would prevent you from performing essential	
Yes No	explain:	
Emergency Contact:	Relationship:	
Home Phone:	Work Phone :	
parish. I also understand that there is	unteer only and not as an agent or employee of the school or no employment relationship or inferred right or obligation of	
Signature	Date	
OFFICE USE ONLY		
Personal Interview Date:	Interviewer:	
Reference Check Completed Date:	Interviewer:	
Archdiocese of Los Angeles VPIN	Date:	
Child Sexual Abuse Education Comple	ted Date:	