



VOLUNTEER APPLICATION

St. Mark Parish

Pastor: Reverend John P. Miceli

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Cleveland, Ohio 44111

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CONTACT INFORMATION

NAME: _____ DATE: _____

HOME PHONE: _____ WORK PHONE: _____

OTHER PHONE: _____ E-MAIL: _____

ADDRESS: _____ ZIP: _____

(Prior address if less than 5 years at above address: _____)

Do you possess a valid Ohio driver's license? Yes _____ No _____ License#: _____

NATURE OF VOLUNTEER WORK: _____

Duration of volunteer work: _____

(i.e. Sport season, school year, unlimited, etc.)

Virtus Trained? Yes _____ No _____ Fingerprinted? Yes _____ No _____

When trained?/Where trained?: _____

Have you ever been convicted of or plead "no contest" to any crime other than a minor traffic offense?

Yes _____ No _____ If yes, explain: _____

List name, address, and phone # of 2 references:

1. _____

(name)

2. _____

(name)

(address)

(address)

(phone #)

(phone #)