

Hilltop Recovery Ministries  
Volunteer Application

Thank you for your interest in volunteering for Hilltop Recovery Ministries (HRM). We understand how important time is in today's busy world. Therefore, we want to you to know, we recognize and appreciate just how valuable each member is to the HRM team.

HRM has many different areas in which one can volunteer from assisting in fundraising, working in the office, or mentoring in the field with young women. As you complete this application please share with us your talents, passions, and area of interest so that we can best match you with our area of need. We want to make sure that our volunteers get as much from their time with HRM as we get from you.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Apt #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

In order to provide a layer of security to our staff, volunteers, and clients a background check is ran on each person. All personal information is kept confidential and never shared with third parties.

DL/State Id #: \_\_\_\_\_ State Issued: \_\_\_\_\_ DOB: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Any other name you have used: \_\_\_\_\_

Print Name: \_\_\_\_\_

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

How did you become aware of HRM?

Why have you chosen HRM to give of your time?

Is there a specific area or program you hope to volunteer?

Do you have professional certifications or licenses?

Have you ever been convicted of a crime?

Have you ever been through a recovery program?

Two References:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_