



Adult Volunteer Application
Partners in Faith...Working Together

Tell Us About Yourself...

First Name	Last Name	Date of Birth
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Street Address	City	Zip Code
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(____) _____ (____) _____
Home Phone Number **Cell Number**

E-mail Address (THIS WILL BE OUR PRIMARY MEANS OF COMMUNICATION THROUGHOUT THE YEAR!!)

Yes No I am Roman Catholic. If no, what religion/denomination? _____

Yes No I am a registered parishioner at Holy Family.

Tell Us About How You Would Like To Help...

Catechist / Co-Catechist / Aide... Facilitate (or help with) a group of students for our programs.
 Training and lesson plans are provided for Catechists! (Contact Laura Ferlita at 847-907-3436)

Grade requested _____ Sun 10:30am-12pm _____ Sun 5:15-7pm _____ Wed 4:30-6pm _____

Place my child (name) _____ in my class.

New Class - fill at registration; **Continuing Class** - keep last year's class together!

NOTE: Catechist AND students must be registered by June 30

Please pair me up with _____

Hall Monitor... Help us monitor hallways for children / teens safety. I'm available:

Needs on: Sun 10:30am-12pm _____ Sun 5:15-7pm _____ Wed 4:30-6pm _____

Office Help... Can you spare some time to help with administrative tasks during the week?
 Please indicate below which days/times you are available.

Other (ie, chaperone, office help, youth group, retreats, etc.) _____

Notes / Comments: _____

Volunteer Formation / Requirements

- I certify that the information contained in this application is true and complete to the best of my knowledge. I commit to attend all catechist formation and training sessions.
- I understand that additional time for preparing lessons is necessary to be effective as a catechist
- I will consistently support and guide the children and teens of this parish in their faith formation journey.
- I realize that extra time may be required for special events in different grades (ie: Sacrament Prep, service trips, festivals, retreats) and I commit to this additional time as needed.

I will comply with the following Archdiocesan directives for all adults who have contact with minors, BEFORE the start date of the programs I am volunteering for:

- I will complete an **online criminal background check** on the Archdiocese's website (see attached instructions).
- I will attend a **VIRTUS Training Session** (see attached instructions).
- I will complete, sign and return a **State of Illinois – DCFS CANTS form** (see attached – must be completed yearly).
- I will read, sign and return the **Volunteer's Code of Conduct form** (see attached).

Signature

Date

EXPERIENCE WITHIN THE CATHOLIC CHURCH: (NEW volunteers only!)

Previous experience as a religious educator: _____

Participation in parish organizations or activities: _____

Other: _____

I have been a member of **this** parish for _____ years.

I was previously a member of _____ parish for _____ years.

EDUCATION: Relevant areas of study and/or research: _____

OTHER QUALIFICATIONS: Previous experience working with Children or Teens:
