

Sierra Chaplaincy Reserve Chaplain Application

PERSONAL INFORMATION				
Name:			Date:	
Date of Birth:	CA DL:	SSN:		
Home Address:				
City:		State:	Zip:	
Email Address:				
Cell Phone:	Home Phone:	Work Phone:		
Place of employment:				
Supervisor's name:		Title:		
Email Address:		Phone:		
Name of emergency contact:		Relationship:		
Address:				
City:		State:	Zip:	
Email Address:		Phone:		
Language(s) spoken other than English and level:				
EDUCATION				
Highest level of education:				
Name(s) of institution(s):				
Degree(s) or Certificate(s) earned (year):				
Area(s) of study:				
Are you licensed, commissioned, or ordained as a minister?			Date:	
Church or Denomination:		Phone:		
Address:				
City:		State:	Zip:	

REFERENCES Please list your current Pastor, someone unrelated to you, and a Coworker (if unemployed another person unrelated to you) that can attest to your character, skills, a reliability. Name of Pastor: Years Known: Church Name and Address: State: Zip: City: Email Address: Phone: Name of Coworker: Years Known: Home Address: Zip: City: State: Email Address: Phone: Name: Years Known: Home Address: State: Zip: City: Email Address: Phone: PERSONAL HISTORY Failure to answer accurately is cause for rejection/termination. Use additional pages if necessary. Have you ever been arrested for a crime? If so, explain: Have you ever been discharged or forced to resign from any job for misconduct or unsatisfactory service? If so, explain: Have you ever been asked to step down from any ministry position? If so, explain:

Why do you wish to become a volunteer Chaplain with the Sierra Chaplaincy and how long have			
you had this desire?			
Do you have special training or experiences that may apply to your work as a Chaplain?			
Please read the follow before signing: I certify that all information is true and has been given voluntarily. I understainformation may be disclosed to any party with legal and proper interest. I refrom any liability whatsoever for supplying such information.			
Upon being offered a volunteer position, I understand that I may be required additional information pertinent to the position for which applied.	to provide		
I give permission for Sierra Chaplaincy to send me emails, newsletters, and updates:YesNo			
Applicant Signature:	Date:		