



pregnancyresourcecenter

Volunteer Application

Name: _____ **Date:** _____

Address: _____

Phone: _____ **Email:** _____

Church Home: _____

References: Please give the name, phone number, and email of these three references.

Spiritual Reference: (your pastor, a small group leader, or spiritual mentor)

Name: _____ **Phone:** _____

Email: _____

Personal/Professional Reference #1: (who has known you for 2+ years, that is not family)

Name: _____ **Phone:** _____

Email: _____

Personal/Professional Reference #2: (who has known you for 2+ years, that is not family)

Name: _____ **Phone:** _____

Email: _____

Please write out your journey with Christ (your testimony) on a separate sheet of paper.

How did you hear about the PRC ministry? _____

What is your understanding of what the PRC does?



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What are the strengths, talents, passions and areas you are gifted in?

We are a faith based ministry and want to share the hope of Jesus with others. Please share of what experience you have sharing your faith:

What is your understanding of abortion and what is your view on the topic?

What times and days are you available to be at the PRC?

For Medical Volunteers Only:

Work Experience: _____

License & Certification: _____

Have you been involved in any incidents or claims that resulted in disciplinary action? If yes, please explain: _____

How do you see your role in the PRC? (pregnancy testing, ultrasounds, education, follow-up calls, etc)
