

OPPORTUNITY CAMP 2008

A Program of Unlock Ministries

ADULT STAFF

Staff Application, Commitment, and Release

PLEASE PRINT

First Name: _____ Last Name: _____

Middle Name: _____ Maiden Name: _____

Address: _____ City: _____

State: _____ Zip: _____ Home Phone: _____

Cell Phone (optional): _____ Email: _____

Employer: _____ Work Phone: _____

Church: _____

Permission to obtain criminal history record:

I understand that I am offering my services to Unlock Ministries without compensation. I agree to comply with the program regulations that include a criminal history check. It is understood that the information obtained through this check will be confidential and used strictly for determining eligibility for the Unlock Ministries Volunteer Program. As an applicant herein, I agree to hold harmless Unlock Ministries, Inc., its board of directors and executive director, and all pursuit to and in accordance with the foregoing.

Driver's License #: _____ DL State: ____ Expiration Date: _____

Date of Birth: _____ Sex: _____ Race: _____

Signature: _____ Date: _____

Return completed application to:

Unlock Ministries

PO Box 5562

Midland, Texas 79704

***If you have a different address for your college residence, please include it on the back of this application.**