



Oregon Women's Prison Ministry

Volunteer Application Form

"For I know the plans I have for you," declares the Lord, "plans to prosper you and not to harm you, plans to give you hope and a future. Then you will call upon me and come and pray to me, and I will listen to you. You will seek me and find me when you seek me with all your heart." Jeremiah 29:11-13

Mission

Oregon Women's Prison Ministry is dedicated to restoring hope and direction to the lives of women prisoners by sharing the love of Jesus Christ through evangelism, discipleship, one on one counseling and aiding in their transition from prison to the community.

Beliefs

We believe that there is one true God. God is manifested through the Father, the Son (Jesus Christ) and the Holy Spirit. This is called the Trinity.

(Duet. 6:4, Matt. 28:19-20, Heb. 1:1-3)

We believe that the Bible is the divinely inspired Word of God. It is used for teaching, correcting, giving direction and hope.

(II Tim. 3:16-17, II Peter 1:16-21)

We believe that man was designed in the image of God and designed for a purpose.

(Gen. 1:27, Jer. 29:11)

We believe that man falls short of God's glorious standard. This is called sin. Because of sin, man has experienced spiritual death (namely, separation from a Holy, loving God).

(Rom. 3:23-24, Is. 59:2)

We believe that Jesus Christ came to earth, fully God and fully man, and lived the perfect life that we could not. He died on the cross on our behalf paying the penalty for our sins. On the third day, he rose from the grave conquering death and gives us a chance to begin a new relationship with Him.

(Rom. 6:23-24, I John 3:16, Rom. 5:11)

We believe that through God's grace and our faith we receive forgiveness of our sins and receive a new life in Jesus Christ. God has designed this glorious plan of salvation through Jesus Christ.

(John 1:12, Eph. 2:8 & 9, I John 1:9, II Cor. 5:17)

We believe service is not a way to earn salvation, but a way of giving back and thanking the God we love.

(Eph. 2:10, Eph. 5:10, 15-20)

By signing below, I am hereby showing I am in agreement with OWPM Belief statement and I support the mission of OWPM whole-heartily and without reservation.

Signature: _____ Print Name: _____ Date: _____

Contact Information

_____			_____			_____		
<i>First Name</i>					<i>Last Name</i>			<i>M.I.</i>
_____			_____			_____		
<i>Address</i>					<i>City</i>	<i>State</i>	<i>Zip</i>	
_____			_____			_____		
<i>Home Phone</i>	<i>Cell Phone</i>	<i>Work Phone</i>		<i>Email Address</i>				
<i>What is the best way to contact you?</i> _____								
<i>Current Employer</i> _____						<i>Years at current job</i> _____		
<i>Church Name</i> _____				<i>Pastor's Name</i> _____			<i>Phone</i> _____	
<i>Have you ever been convicted of a crime?</i> _____ <i>If yes, please explain</i> _____								

Emergency Contact

<i>Name</i> _____	<i>Relationship</i> _____	<i>Phone</i> _____
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Personal References

Please list two personal references, that are not members of your family, that you have known at least 6 months.

1. Name _____ Relationship _____ Phone _____
 Address _____ City _____ State _____ Zip _____
2. Name _____ Relationship _____ Phone _____
 Address _____ City _____ State _____ Zip _____

Volunteer Experience

Please list your most recent volunteer experience.

1. Organization _____ Position _____ Location _____
 Contact _____ Phone _____ Dates: From _____ To _____
2. Organization _____ Position _____ Location _____
 Contact _____ Phone _____ Dates: From _____ To _____

Skills & Experience

Please list any skills, hobbies, interests or expertise that you have that will aid in your volunteer work.

What do you hope to gain from your volunteer work with OWPM?

Are you willing and able to attend necessary training and meetings?

What do you think is the most important aspect of helping a woman to change her life?

What are your strengths and weaknesses?

Strengths _____

Weaknesses _____

Screening Process Consent

I understand that any false information given on this application or during the screening process will be grounds for rejection from volunteering with Oregon Women's Prison Ministry (OWPM). I understand that information I learn about the women I will be helping as a volunteer with OWPM is to be kept confidential or I will be dismissed as a volunteer. I understand that any misconduct on my part is grounds for being dismissed as a volunteer. I have read and understand the above statements and consent to Oregon Women's Prison Ministry (OWPM) completing the full volunteer screening process. I understand that I may be denied to become a volunteer for OWPM based on the information gathered during the screening process or for other unrelated reasons.

By signing below, I hereby give consent for OWPM to conduct a thorough screening process based on the information I have provided.

Signature: _____ Print Name: _____ Date: _____

Mail completed applications to:

OWPM
P. O. Box 91186
Portland, Oregon 97291

Thank You!

For Office Use Only

Notes: _____

Staff Signature _____ Date Screening Completed _____