

Thank you for your interest in volunteering with Solus Christus! Please complete the following application as completely and accurately as possible. Questions can be directed to our office at 336-813-3007. Completed applications can be submitted by mail or email:

PO Box 416, East Bend, NC 27018

e-mail: office@soluschristusinc.org

Volunteer Application

| Name | | |
|--|-----------|--|
| Date | | |
| Address | | |
| City | State Zip | |
| Phone # | | |
| Email Address | | |
| Date of Birth | | |
| Marital Status Spouse's nam | | |
| Emergency Contact | Phone # | |
| Church attending | | |
| List and briefly detail any volunteer history: | | |
| | | |
| | | |
| | | |
| What does it mean to you to be a Christian? | | |
| | | |
| | | |

| Please share your testimony: | | |
|--|--|--|
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| What motivated you to apply at Solus Chris | stus: | |
| тинатина | | |
| | | |
| | | |
| What area of ministry would you like to part | ticipate in (mark any that apply)? | |
| Driving women to appointments (m | nust be female driver, or husband and wife togethe | |
| Briving women to appointmente (iii | nast se female anvel, et messane and who tegethe | |
| Maintenance Gardens | Work CrewCooking lessons | |
| Leading Bible Studies C | Crafts Therapy | |
| | | |
| Other, explain | | |
| Days and times available | | |
| | | |
| | | |
| Have you ever been convicted of a crime? | Yes No | |
| If you placed list and avalain. | | |
| n yes, piease list and explain. | | |
| | | |
| | | |
| List 2 References: | | |
| | | |
| <u>Pastoral</u> Name | Phone # | |
| | T Holic # | |
| Address | | |
| | | |
| Family/Friend | | |
| Name | Phone # | |
| Address | | |

Solus Christus Statement Of Purpose

Solus Christus is a residential stepping stone for women who desire freedom from substance abuse. We aim to transform women through hope, healing and recovery in Christ and to be a trusted catalyst for women's lifelong recovery in Christ. We provide a safe place to stay while we help them get into a long-term Christian rehab. We are a non-profit organization which manifests the love of God to the women who come through our doors.

| Volunteer Agreement and Release of Liability | | |
|---|--|--|
| I, | e extent permitted by state and federal | |
| I further affirm that I am applying as a volunteer at Sol entitled to any wages, salaries, or compensation of an Christus accomplish its God given purpose. I have reapurpose of Solus Christus. | y sort. Rather, it is my desire to help Solus | |
| I further agree to release and forever discharge Solus representatives, from any and all claims, demands, da of any kind or nature whatsoever, arising out of or in consolus Christus. I understand various types of voluntee carry risk of bodily injury and I assume all risk. | images, actions, causes of action or suits onnection to my volunteering at, or for, | |
| I understand that many women who are attending Solo and manipulative relationships, and while seeking hop come from very hard and difficult backgrounds. Therefore all my interactions at Solus Christus, while also unders watchful of my surroundings and discuss any concerns I further agree to keep confidential the resident's ident women who are attending the Solus Christus program | te and restoration they still frequently fore I agree to live out the love of Christ in standing the need to be mindful and s or questions with the director or staff. ities and any information learned about | |
| Signature | Date | |