



www.lifechoicesdyersburg.com

We are a non-profit medical clinic,
educating and equipping individuals to make empowered decisions,
providing pregnancy confirmation, and offering programs of prevention, intervention, and restoration.

VOLUNTEER APPLICATION

Name _____
Last First Middle Initial

Address _____
Number & street City State Zip code

Phone # _____ Are you over 18 years old? Yes No

Email Address _____

Birthdate: _____ Social Security # _____

Have you ever been convicted of a crime? Yes No

If yes, explain: _____

Education:

1. High School: Number of years completed (1-4) _____ Diploma: Yes No
G.E.D.: Yes No

School name _____

2. College and/or Vocational School: Number of years completed (1-7) _____
School(s) _____

Degrees earned _____ Dates _____

Describe other training or degrees _____

Previous Volunteer Experience: List most recent volunteer experience first.

Organization _____

Date of volunteer service: From _____ To _____

Address _____

Position/Duties _____

Phone # _____ Supervisor name _____

Organization _____

Date of volunteer service: From _____ To _____

Address _____

Position/Duties _____

Phone # _____ Supervisor name _____

Employment History: List most recent employment first.

Employer _____

Date of employment: From _____ To _____

Address _____

Position/Duties _____

Telephone _____ Supervisor name _____

Employer _____

Date of employment: From _____ To _____

Address _____

Position/Duties _____

Telephone _____ Supervisor name _____

Additional Information:

1. What is your reason for seeking to volunteer at Life Choices? _____

2. Do you consider yourself a Christian? Yes No

If yes, how long have you been a Christian? _____

3. As a Christian, what is the basis of your salvation? _____

4. Please provide the following information concerning your local church.

Church name _____ Denomination _____

Address _____

Pastor's name _____ Phone _____

Positions in which you have served _____

5. This organization is a Christian pro-life ministry. We believe that our faith in Jesus Christ empowers us, enables us, and motivates us to provide pregnancy services in this community. Please write a brief statement about how your faith would affect your volunteer work at this center.

6. What special skills, talents, gifts, or personality traits would you bring to this ministry?

7. Have you ever counseled a woman who was considering an abortion? Yes No

If yes, explain:

8. Have you had any traumatic experiences relating to abortion? Yes No

If yes, explain:

9. Under what circumstances would you consider abortion as an alternative for a woman with an unplanned pregnancy?

Never an option

- In cases of rape or incest
- In cases where the mother's life was in extreme peril
- In cases of extreme psychological distress
- Other (specify) _____

10. Please list any books, films, or other material that you have read or viewed that relate to abortion, pregnancy, or alternatives to abortion.

11. How would you rate yourself in the following areas?

- a. Knowledge of abortion methods excellent good fair poor
- b. Knowledge of current laws concerning abortion excellent good fair poor
- c. Knowledge of what the Bible teaches about abortion excellent good fair poor

12. Are you currently or have you ever been involved in seeking to adopt a child? Yes No

(Explanation) _____

13. What do you consider to be your possible areas of weakness?

14. Are there any particular personality types with whom you have difficulty working?

References:

Please list persons who are not related to you and who have known you for at least two years, including your pastor. Please give a reference form to each person and ask those individuals to mail or drop them off to Life Choices in a sealed envelope.

Name	Address	Phone #	Years acquainted	Relationship
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that the facts set forth in this volunteer application are true and complete to the best of my knowledge, and I authorize Life Choices to verify their accuracy and to obtain

reference information concerning my character and capabilities. I release Life Choices and any person or entity providing such reference information from any and all liability relating to the provision of such information or relating to any decisions made based upon such information. I give permission to Life Choices to conduct a criminal background check to the extent that my volunteer duties may involve direct interaction with minors.

If I become a volunteer at the pregnancy center, I agree to fully adhere to its policies and rules, including those rules relating to maintaining confidentiality. I hereby pledge that all information, both client and financial supporter information, will remain confidential. I will not discuss any information with anyone except the Executive Director or appropriate manager.

I recognize that, as a volunteer, I will serve in a different role than the employees of the pregnancy center, and I am not seeking, nor expecting to receive, any compensation or other benefits in return for any volunteer services which I may provide for this ministry.

I further certify that I have read and that I am in full agreement with the pregnancy center's Statement of Faith, Statement of Principle, and Policy Statement on Abortion..

Signature of applicant _____ Date _____



Mission Statement

We are a non-profit medical clinic,
educating and equipping individuals to make empowered decisions,
providing pregnancy confirmation, and offering programs of prevention,
intervention, and restoration.



Statement of Faith

1. We believe the Bible to be the inspired, the only infallible, authoritative Word of God.
2. We believe that there is one God, eternally existent in three persons; Father, Son, and Holy Spirit.
3. We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return in power and Glory.
4. We believe that for the salvation of lost and sinful man, regeneration by the Holy Spirit is absolutely essential, and that this salvation is received through faith in Jesus Christ as Savior and Lord and not as a result of good works.
5. We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life and perform good works.
6. We believe in the resurrection of both the saved and the lost; they that are saved unto the resurrection of life and they that are lost unto the resurrection of damnation.
7. We believe in the spiritual unity of believers in our Lord Jesus Christ.



Policy Statement on Abortion

We firmly stand opposed to abortion on demand and seek to provide solutions for women with crisis pregnancies. We recognize there are no easy alternatives available to these women and often times just a few really workable plans. When we ask a woman not to choose the right made legal to her by the Supreme Court in 1973, we also recognize that we have asked her to undertake a difficult path which will probably contain significant pain and hardship. Thus, we never approach her casually or callously.

Abortion on demand is an issue which contains social, economical, medical, legal, and political components, but is ultimately an issue of morality. The watershed question is whether or not the organism created at conception is a human being or whether it is something sub-human. Is the fetus a human life or something else?

As Christians who believe in the authority of Scriptures, we believe without reservation or qualification that the Scriptures teach that human life is sacred because man is a part of His creation, having been created in His own image.

Thus, human life is sacred and of inestimable worth. Man's value, which has been inalienably determined by God must never be cheapened or subjected to utilitarian value. Every individual must be treated with this high degree of dignity and worth regardless of age, race, intelligence, and physical capabilities. We reject any philosophy or practice which determines a person's worth or right to live founded on an elitist, humanistic perspective of valuing individuals based on their race, potential social contribution, neediness, or physical and mental capabilities.

Since human life is sacred, the taking of a human life must only be done on the basis of a Scripturally justifiable reason. Because the Scriptures prohibit taking the life of an innocent human being, we stand morally opposed to abortion on demand.

We do recognize that there are on occasion situations in which the mother's life is being endangered, but these situations must be cautiously and sensitively approached.

We, the Board of Directors and Executive Director, therefore reaffirm our strong opposition to abortion on demand and commit ourselves to faithfully working to provide alternatives to women with crisis pregnancies.



1. Life Choices Medical Clinic is an outreach ministry of Jesus Christ through His Church. Therefore, Life Choices, embodied in its volunteers, is committed to presenting the Gospel of our Lord to women with crisis pregnancies, both in word and in deed. Commensurate with this purpose, those who labor as Life Choices board members, directors, staff, and volunteers are expected to know Christ as their Savior and Lord.
2. Life Choices is committed to providing its clients with accurate and complete information about both prenatal development and abortion.
3. Life Choices is committed to integrity in dealing with clients, earning their trust and providing promised information and services. Life Choices denounces any form of deception in its corporate advertising or individual conversations with its clients.
4. Life Choices is committed to assisting women to carry to term by providing emotional support and practical assistance.
5. Life Choices does not discriminate in providing services because of race, creed, color, national origin, age, or marital status of its clients.
6. Life Choices does not recommend, provide, or refer for abortion or abortifacients.
7. Life Choices offers assistance free of charge all the time.
8. Life Choices is committed to creating awareness within the local community of the needs of pregnant women, and of the fact that abortion only compounds human need rather than resolving it.
9. Life Choices does not recommend, provide, or refer single women for contraceptives. (Married women seeking contraceptive information should be urged to seek counsel, along with their husbands, from their pastors and physicians.)
10. Life Choices recognizes the validity of adoption as one alternative to abortion, but is not biased toward adoption when compared to other life-saving alternatives. It is independent of adoption agencies, relating to them in the same manner as to other helpful referral sources. Life Choices receives no payment of any kind from the agencies, does not enter into contractual relationships with them, and does not share combined office space. Adoption agencies are not established under the auspices Life Choices. Life Choices neither initiates nor facilitates independent adoptions, though they may refer independent adoptions in states where it is legal.



Volunteer Confidentiality Pledge

I hereby pledge that all information, both client and financial supporter information, will remain confidential. I will not discuss any information with anyone except the Executive Director or appropriate manager.

I understand that if I break my pledge, I may be terminated as a volunteer for Life Choices.

Signature of applicant _____ Date _____



We are a non-profit medical clinic,
 educating and equipping individuals to make empowered decisions,
 providing pregnancy confirmation, and offering programs of prevention, intervention, and restoration.

Volunteer Reference Request

Reference for _____

The above-named person has submitted an application to volunteer for the pregnancy center. A volunteer provides support to women facing unplanned pregnancies. Some of the qualities sought in a volunteer are:

1. A genuine commitment to Jesus Christ as Savior and Lord of their lives
2. A dependable, responsible attitude; a willingness to give of themselves to the women with whom they work
3. A steadfast and faithful confidence in the Word of God and an ability to communicate its truth

Please describe the applicant with particular emphasis on the qualities outlined above.

How long have you known applicant? _____ What is your relationship to applicant? _____

Please rate applicant regarding the following:

	Below average	Average	Above average
Dependability			
Spiritual maturity			
Communication skills			
Cooperation			
Compassion/Mercy			
Submission to authority			
Initiative			

Your name (please print)

Daytime phone number

Signature

Date

Please mail the completed form to P.O. Box 1768, Dyersburg, TN 38025. Thank you.



We are a non-profit medical clinic,
 educating and equipping individuals to make empowered decisions,
 providing pregnancy confirmation, and offering programs of prevention, intervention, and restoration.

Volunteer Reference Request

Reference for _____

The above-named person has submitted an application to volunteer for the pregnancy center. A volunteer provides support to women facing unplanned pregnancies. Some of the qualities sought in a volunteer are:

4. A genuine commitment to Jesus Christ as Savior and Lord of their lives
5. A dependable, responsible attitude; a willingness to give of themselves to the women with whom they work
6. A steadfast and faithful confidence in the Word of God and an ability to communicate its truth

Please describe the applicant with particular emphasis on the qualities outlined above.

How long have you known applicant? _____ What is your relationship to applicant? _____

Please rate applicant regarding the following:

	Below average	Average	Above average
Dependability			
Spiritual maturity			
Communication skills			
Cooperation			
Compassion/Mercy			
Submission to authority			
Initiative			

 Your name (please print)

 Daytime phone number

 Signature

 Date

Please mail the completed form to P.O. Box 1768, Dyersburg, TN 38025. Thank you.



We are a non-profit medical clinic,
 educating and equipping individuals to make empowered decisions,
 providing pregnancy confirmation, and offering programs of prevention, intervention, and restoration.

Volunteer Reference Request

Reference for _____

The above-named person has submitted an application to volunteer for the pregnancy center. A volunteer provides support to women facing unplanned pregnancies. Some of the qualities sought in a volunteer are:

7. A genuine commitment to Jesus Christ as Savior and Lord of their lives
8. A dependable, responsible attitude; a willingness to give of themselves to the women with whom they work
9. A steadfast and faithful confidence in the Word of God and an ability to communicate its truth

Please describe the applicant with particular emphasis on the qualities outlined above.

How long have you known applicant? _____ What is your relationship to applicant? _____

Please rate applicant regarding the following:

	Below average	Average	Above average
Dependability			
Spiritual maturity			
Communication skills			
Cooperation			
Compassion/Mercy			
Submission to authority			
Initiative			

Your name (please print)

Daytime phone number

Signature

Date

Please mail the completed form to P.O. Box 1768, Dyersburg, TN 38025. Thank you.