

BECOME A VOLUNTEER!

Thank you for your interest in volunteering at the Center. We are thankful for any and all help that is provided. Whether you volunteer during office hours mentoring clients or doing office work, or your group volunteers cleaning or landscaping as a service project, we have lots of work for you to do!

All volunteers will need to complete a Volunteer Application and a background check (fee is \$15).

If you are able to pay the fee for your background check, please make your check payable to A New Hope PRC and mail to A New Hope, PO Box 7, Shepherdsville, KY 40165.

Please contact Wanda Sullivan at (502) 212-2535 with any questions you may have.



Statement of faith and principle

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 to 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.

Adapted from the National Association of Evangelical's statement of faith.

A NEW HOPE PREGNANCY RESOURCE CENTER
VOLUNTEER APPLICATION

505 Buffalo Run Rd, Suite 104, Shepherdsville, KY 40165
ANewHopePRC@gmail.com www.ANewHopePRC.com

Name _____ Birth date _____

Address _____ City _____ Zip _____

Phone(s) _____ Email: _____

Marital Status _____ Spouse's Name _____

Occupation/Employer _____ Highest Edu. Completed _____

Skills, Talents, Interests _____

Church _____ How Long? _____ Phone # _____

Pastor _____ Phone/Email _____

Do you consider yourself a Christian? Y or N If so, for how long? _____

Please list any prior volunteer experience with your church or other organizations.

Why do you want to volunteer here? _____

What kind of commitment would you be willing to make? (Circle one)

3 hrs/ week 6 hrs/week Other _____

The following tasks are typically performed by volunteers at the Center:

- | | | |
|---------------------|---------------------------------|----------------------------|
| ❖ Counsel clients | ❖ Assist clients with resources | ❖ Data entry |
| ❖ Pray with clients | ❖ Sort/organize donations | ❖ Misc. office tasks |
| ❖ Educate clients | ❖ Cleaning | ❖ Childcare |
| ❖ Answer phones | ❖ Help with mailings | ❖ Fundraisers (2 per year) |

List any of the above tasks you feel uncomfortable with _____

Have you ever had a traumatic experience related to a miscarriage, death of a child or abortion? If yes, please explain.

Are you currently in the process of adopting a child or wanting to adopt? Y or N

Please *completely* fill out the following section. We must have two references who are not family members and whom you have known for at least two years. The third reference must be from your pastor or church leader (we will send them a letter).

Name	Phone Number(s)	Relationship	# of Years Known
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please use the space below to share any other pertinent information about yourself or comments that you would like to share with us.

In agreeing to be a volunteer of A New Hope Pregnancy Resource Center, I am willing to be accountable to its leadership. I have read and am in agreement with the Statements of Faith and Principle. The information I have provided in this application is accurate and complete and may be verified by A New Hope Pregnancy Resource Center. I authorize the center and its agents to verify any information related to this application. I also authorize all individuals, previous employers, and law enforcement officials to freely release any information concerning my background to the center, and I hereby release any and all of them from any liability for doing so. I agree to execute any releases necessary to permit the release to A New Hope Pregnancy Resource Center of prior employment, medical, judicial and law enforcement records and information pertinent to matters addressed in this application.

Signature

Date

Thank you! We will contact you soon.

FOR OFFICE USE ONLY

Interview Date _____ Approved By _____ Date _____

Start Date _____ Regularly Scheduled Day(s) of Week _____ Times _____

Comments

A NEW HOPE PRC VOLUNTEER JOB DESCRIPTION & EXPECTATIONS

- ❖ *Regularly attend and actively participate in a local church.*
- ❖ *Be a Christian who is constantly seeking the Lord.*
- ❖ *Conduct yourself in a Christ-like manner, adhering to Biblical principles.*
- ❖ *Positively represent A New Hope Pregnancy Resource Center.*
- ❖ *Be flexible and willing to help wherever needed.*
- ❖ *If a problem or concern arises, meet privately with the director. We do not tolerate gossip.*
- ❖ *Be reliable. If you know in advance that you will be unable to volunteer on your scheduled day, try to switch with another volunteer AND let a staff person know. In the case of an unexpected event, call a staff person as soon as possible.*
- ❖ *Read any training materials given to you. Try to acquire as much information as possible by reading available literature.*
- ❖ *Attend all quarterly volunteer meetings and periodic trainings.*

Recognizing that A New Hope PRC is an evangelical ministry, I openly acknowledge my personal faith in Jesus Christ as my Lord and Savior. The new birth accomplished by the Spirit of Christ within me has manifested itself in a lifestyle that is holy and pleasing to the Lord. I have read A New Hope's Statement of Faith and Statement of Principle, and I am in complete agreement with all statements in it.

I believe in the sanctity of human life as taught in the Bible, and therefore reject abortion as an acceptable option for any woman facing a crisis pregnancy. I will at no time participate in any action which results in the destruction of innocent human life.

I accept the responsibility to act as an advocate on behalf of the women under my care; to give accurate information, emotional support and spiritual guidance. All information on A New Hope PRC clients will be kept in strict confidence. I will continue to keep the information confidential, even after I am no longer a volunteer for A New Hope PRC.

Understanding the vital role volunteers play in the work of the A New Hope PRC, I commit myself to faithfully serve each week. I have read and accepted the Volunteer Job Description & Expectations, and I understand that I will have regular evaluations so that I can continually improve as a volunteer.

As a Christian, I pledge to live a lifestyle that will glorify God. During my time as a volunteer of A New Hope PRC, I will follow the Biblical guidelines of chastity outside of marriage and will consider my public/private walk as part of my representation of A New Hope PRC. If married, I will honor my vows before God, both publicly and privately.

Volunteer's Signature

Date

Director's Signature

Date

Universal Precautions

All personnel at the Center will follow universal precautions.

Any person handling or disposing of pregnancy tests, urine specimens, or soiled diapers or performing any other tasks, which may involve exposure to potentially infectious material shall be required to wear protective gloves at all times while performing such tasks. After the removal of gloves the hands are washed with soap and water.

Any person who comes into contact with any potentially infectious materials shall immediately wash those areas of skin or membrane, which have sustained such contact. Hands and skin shall be washed with soap and water. Flush mucous membranes with water.

All tasks and procedures involving the handling of potentially infectious materials shall be performed in a manner to minimize splashing, spraying, spattering or generating droplets of these materials.

Separate waste bags will be used for the disposal of pregnancy tests, urine specimen containers and other potentially infectious materials. These waste bags are to be placed in the outside garbage bin immediately following removal from the center.

Regularly scheduled housekeeping measures will be implemented to assure that surfaces and other items which may come into contact with potentially infectious materials are decontaminated. Cleaning should be done with detergent and water. Gloves should be worn during cleaning.

Eating, drinking, applying cosmetics, and handling contact lens shall be prohibited in areas where pregnancy tests, urine specimens, or soiled diapers are handled.

Food and drinks shall not be kept in areas where potentially infectious materials are present.

Personnel should maintain a high standard of personal hygiene, for example, hands should be washed at the beginning and end of each shift and before and after eating, drinking, and going to the toilet.

The center recommends the hepatitis B vaccine and vaccination series to all employees and volunteers who have exposure to potentially infectious materials. This is available at your family care provider or health department.

In the event of a specific exposure incident, the center will make available to any employee or volunteer an appropriate confidential medical evaluation and follow-up.

The center shall provide initial training and annual retraining for each employee or volunteer who may be exposed to potentially infectious materials.

The center shall maintain appropriate and confidential records for each employee or volunteer who may be exposed to potentially infectious materials.

These guidelines are taken from the web sites for the National Occupational Health & Safety Commission and for OSHA.

I have read and understand the above information.

Volunteer's Signature

Date