



Volunteer Application

Every individual (including spouses) interested in volunteering at Pioneers must fill out a separate application

Contact Information

Last Name	
First Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Estimated Date of Arrival	
Profession	
Preferred Role at Pioneers	

Have you ever been convicted of a felony?	YES	NO
Do you have any special considerations that we need to be aware of?		
How did you hear of PIONEERS?		
Will you be bringing a camper/RV?	YES	NO
Do you need housing?	YES	NO
Do you know anyone who is employed at the USA Mobilization base?	YES	NO
Name _____		

Availability

How many hours would you like to volunteer a week? _____

During which days and time slots are you available for volunteer assignments? (Place a check mark beside each time slot on each day that you are available)

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

If you have previous volunteer experience with PIONEERS, please specify which teams you worked with and what tasks you worked on.

Testimony

Please tell us about how you came to know the Lord and about your relationship with Christ. You may use the space below and attach an additional sheet of paper, if necessary.

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Please return this application to: **PIONEERS**

Attn: Rachel Corsi
10123 William Carey Dr.
Orlando, FL 32832

Please write or call Rachel Corsi with any questions about completing this form.
E-mail: rcorsi@orlandoteam.com Phone: 1-800-755-7284 ext. 198