

Pregnancy Care Center of MHC, Inc.
314 Fairy Street Extension, Suite E
Martinsville, VA 24112
276.634.5433

VOLUNTEER APPLICATION-PCC MHC

Name _____
Last First Middle Initial

Address _____
Number & street City State Zip code

Home # _____ Cell# _____

Email _____ Social Security # _____

Note: the Social Security Number is used for background checks and will be blacked out after obtained.

Are you over 18 years old? ___Yes ___No

Have you ever been convicted of a crime? ___Yes ___No

If yes, explain: _____

Education:

1. High School: Number of years completed (*circle one*) 1 2 3 4 Diploma: ___Yes ___No
G.E.D.: ___Yes___No

School name _____

2. College and/or Vocational School: Number of years completed (*circle one*) 1 2 3 4 5 6 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 _____

Telephone _____ Supervisor name _____

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Organization _____ Date of volunteer service: From _____ To _____

Address _____

Position/Duties _____

Telephone _____ 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 here? _____

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 _____

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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

(Explanation) _____

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

(Explanation) _____

9. Have you ever known a single pregnant woman? Yes No

(Explanation) _____

10. 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) _____

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

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12. 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___

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

(Explanation)_____

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

15. 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.

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

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Statement of Faith

(Adapted from the National Association of Evangelical's Statement of Faith)

1. We believe the Bible to be the inspired, the 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 that are lost unto the resurrection of damnation.
7. We believe in the spiritual unity of believers in our Lord Jesus Christ.

Statement of Principle

1. The Pregnancy Care Center of MHC, Inc. (PCC) is an outreach ministry of Jesus Christ through His church. Therefore, the PCC, embodied in its volunteers, is committed to presenting the gospel of our Lord to women with unplanned pregnancies- both in word and in deed. Commensurate with the purpose, those who labor as PCC center board members, directors, and volunteers are expected to know Christ as their Saviour and Lord.
2. The PCC is committed to providing its clients with accurate and complete information about both prenatal development and abortion.
3. The PCC is committed to adopting and enforcing internal procedures to assure that abortion education is performed in a caring and compassionate manner with due respect for the emotional sensibilities of each client. Prior to usage by the center, client materials containing descriptions or depictions of abortion will be reviewed by a qualified medical professional (e.g. physician, nurse) and determined to be medically accurate. Materials and graphic depictions of abortion or its results are not content appropriate when the primary effect of such materials is to shock rather than to educate. When using approved abortion education materials with clients, center personnel will always give specific warnings and obtain written client permission before showing any videos, brochures, or diagrams that contain any visual depictions of abortion or its results. No client will ever be asked, pressured or coerced to view abortion education materials which she or he has indicated a desire not to see.

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4. The PCC is committed to integrity in dealing with clients, earning their trust, and providing promised information and services. The PCC denounces any form of deception in its corporate advertising or individual conversations with its clients.
5. The PCC is committed to assisting women to carry to term by providing emotional support and practical assistance. Through the provision of God's people and the community at large, women may face the future with hope and plan constructively for themselves, their partners and their babies.
6. The PCC does not discriminate in providing services because of race, creed, color, national origin, age or marital status of its clients.
7. The PCC does not recommend, provide or refer for abortion as abortifacients.
8. The PCC offers assistance free of charge at all times. The investment of time by the clients is required.
9. The PCC 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.
10. The PCC does not recommend, provide, or refer single women for contraceptives. Married women seeking contraceptive information are instructed to seek counsel, along with their husbands, from their pastors and/or physicians.
11. The PCC recognizes the validity of adoption as an alternative to abortion, but is not biased toward adoption when compared to the other life-saving alternatives. The PCC referrals to adoption agencies will do so in a manner that fully protects the interest of the clients and avoids conflicts of interest involving the parties (the PCC, the client, the adoption agency).
12. The PCC otherwise upholds all of the principles and requirements set forth in our Commitment of Care.

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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 the pregnancy center to verify their accuracy and to obtain reference information concerning my character and capabilities. I release the pregnancy center 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 the center 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 client confidentiality. 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 PCC's Statement of Faith and Statement of Principle.

Signature of applicant _____

Date _____

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PCC Volunteer Availability

Name:

Please circle days available:

1. **Mon**
2. **Tues**
3. **Wed**
4. **Thurs**
5. **Fri**
6. **Sat**
7. **Sun**

What is the timeframe for availability (Please indicate a.m. or p.m.):

Circle the best way to contact you and enter your contact information.

1. **E-mail:**
2. **Cell:**
3. **Home:**
4. **Work:**

Emergency name and contact: