



Dallas Weekday School of the Bible  
Weekday Bible Inc. dba  
PO Box 315, Dallas, OR 97338  
Administrative Office: (503) 623-8444

## Classroom Volunteer Application

Name \_\_\_\_\_ Today's date \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_ Cell \_\_\_\_\_

### References:

Pastor's Name \_\_\_\_\_ Phone \_\_\_\_\_  
Church \_\_\_\_\_

### Please list 3 personal references:

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

Summarize your relationship with Jesus Christ and your participation in your local church.

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Summarize your teaching background, especially with children. (Include any teacher training.)

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I certify that all answers given by me are true, accurate and complete. I full understand that any omission and/or misrepresentation of facts requested may be cause for immediate dismissal without prior notice.

Signature \_\_\_\_\_ Date \_\_\_\_\_

In submission of this application, I have read and agree to the School Ministry Covenant, Job Duties and Responsibilities, and the Statement of Faith and Declaration of Moral and Ethical Integrity.

Signature \_\_\_\_\_ Date \_\_\_\_\_