



## Epiphany Ministry Faith Partner/Volunteer Form

Please **print** all information:

Date: \_\_\_\_\_ DOB (optional) \_\_\_\_\_  
Name: (First) \_\_\_\_\_ (MI) \_\_\_\_\_ (Last) \_\_\_\_\_  
Home Address \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Emergency Contact Name \_\_\_\_\_  
Reach Number \_\_\_\_\_ Relationship \_\_\_\_\_

Please describe your interest, education, training, skills, talents and any experiences which have equipped you to work with individuals with special needs: \_\_\_\_\_  
\_\_\_\_\_

Is there any fact or circumstance that would inhibit your being entrusted with the supervision, guidance, and care of individuals with special needs: \_\_\_\_\_  
\_\_\_\_\_

Please provide references. They can be professional, personal or family:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_  
Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

*Epiphany participants are individuals with special needs who participate at the fullest when leadership and volunteer interaction is consistently delivered. Like all of us, participants respond best to environments and relationships where they feel safe and respected. Our goal is to provide such an environment for **all** participants and volunteers involved in the Ministry.*

With that goal in mind, I **commit** to serving in Epiphany as a (please check ALL that apply):

- Sunday School Shepherd**, Sundays from 9:30 to 10:30 a.m.
- Life & Arts Faith Partner (volunteer)**, Sundays from 10:30 a.m. to 2:00 p.m.
- Volunteer at Community Dances

***In compliance with PHPC policy, prior to observing or volunteering in Sunday School or Life & Arts, you will need to complete an on-line training on child abuse and provide additional information to be used for processing a criminal background check. These will be sent to you from the church office.***

- I am willing, as part of the Epiphany application process, to take the on-line training on child abuse and provide the necessary information for the background check.
- I commit to attending additional trainings provided by the church to serve as a Faith Partner/Volunteer in the PHPC Epiphany Programs.

\_\_\_\_\_ Date: \_\_\_\_\_  
Applicant's Signature

At your earliest convenience, please return this application to:  
Preston Hollow Presbyterian Church  
ATTN: Epiphany Faith Partner Coordinator  
9800 Preston Road  
Dallas, TX 75230

Thank you!