



Truth Transformation Worship Center

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www.itistruth.org * <https://www.facebook.com/truthtransformationministries>

Dr. Roderick S. Hawthorne, Senior Pastor * Pastor Crystal W. Hawthorne, First Lady

Volunteer Application

Please complete this form in its entirety to submit your formal request. You will be contacted by a Truth Transformation Worship Center staff member or ministry leader following the administrative procedures of this application. Thank you for your request to render volunteer services at TTWC.

GENERAL INFORMATION

Name: _____ Date: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____ Occupation: _____

Are you a covenant partner of TTWC: Yes No In process Gender: Male Female

How long have you attended TTWC? _____ Date of Membership: _____

Indicate your marital status: Married Single Separated Divorced Widowed

Age: under 18 (give age) _____ 18-24 25-35 35-45 46-55 56-65 66+

EMERGENCY CONTACT

Name: _____ Relationship to you: _____

Address: _____

Email Address: _____ Telephone: _____

MINISTRY AWARENESS AND STATUS

What is your definition of a Christian? _____

Briefly share when and how you became a Christian: _____

How often do you attend TTWC's worship services and bible study (DDM)? _____

VOLUNTEER REQUEST AND EXPERIENCE

List any local community volunteer organization(s) that you are involved in? _____

What TTWC church activities/ministries are you presently involved in? _____

What leadership/volunteer experience have you had? List all previous church work or other volunteer work (identify place and type of work): _____

I am interested in serving with the following ministry: _____

List any education, experience, certifications, or other training relevant to this volunteer position:

List your hobbies, skills, and talents: _____

APPLICANT STATEMENT (Please read and sign below. Sign in the presence of a TTWC staff member):

I certify that this volunteer application was completed by me and that all of the information on this application is true and correct to the best of my knowledge.

VOLUNTEER APPLICANT:

Print Name x _____ Signature x _____ Date x _____

WITNESS / TTWC STAFF MEMBER:

Print Name x _____ Signature x _____ Date x _____