



Holy Cross Parish
Blessed Sacrament Church, 3012 Jackson Street, Sioux City, Iowa 51104-2742
St. Michael Church, 2223 Indian Hills Drive, Sioux City, Iowa 51104-1605
712-277-2949

Holy Cross Parish Religious Education Program Volunteer Form

As a volunteer, you will have a unique opportunity to serve and minister to the hearts and souls of God's children, young and old. We thank you in advance for your willingness to give of your time and talents! Please fill out the form below and mail the form to Holy Cross Parish, 3021 Jackson Street, Sioux City, IA 51104.

Name: _____ Are you registered at Holy Cross Parish? Y / N

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

If you are 18 years or older have you completed the VIRTUS training through the Diocese of Sioux City?
Y / N

I would like to volunteer for the following:

- | | | |
|---|--|---|
| <input type="checkbox"/> PREP Arrival/Dismissal | <input type="checkbox"/> 1 st Grade | <input type="checkbox"/> 8 th Grade |
| <input type="checkbox"/> PREP Catechists (Teacher) Must be 18+ years old | <input type="checkbox"/> 2 nd Grade | <input type="checkbox"/> 9 th Grade |
| <input type="checkbox"/> PREP Catechists Assistant (Teacher Assistant) Younger than 18 years old | <input type="checkbox"/> 3 rd Grade | <input type="checkbox"/> 10 th Grade |
| | <input type="checkbox"/> 4 th Grade | <input type="checkbox"/> Other |
| | <input type="checkbox"/> 5 th Grade | |
| | <input type="checkbox"/> 6 th Grade | |
| | <input type="checkbox"/> 7 th Grade | |

Acknowledgement

In conjunction with my request to serve as a volunteer for the above position, I understand that investigative inquiries on my background are to be made on me, to assess whether any reason exists that would suggest that I not be accepted for the position. These inquiries will be made according to policies of the hiring entity and will consist of a criminal background check and/or driving record check using the services of the Diocese of Sioux City or designated outside firm. The information received will be kept confidential and will be used only to determine my suitability to volunteer for the above noted position. I authorize without reservation, any party contact to furnish all of the above mentioned information. Further, I will allow a photocopy of this authorization to be as valid as the original for purposes of conducting the necessary investigation. In addition, I agree to abide by the policies, procedures and code of conduct that currently exist or may be amended in the future by the entity for which I am volunteering.

Signature of Volunteer Applicant: _____ Date: _____