

Referral Source

How did you hear about St Francis Seraph Ministries?

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Certification

I certify that the information provided in this application is true and complete. I authorize SFSM to investigate in this application and to secure any necessary information from all employers, references, academic institutions, and other organizations. I also agree to execute any additional written authorizations necessary for SFSM obtain access to and copies of records pertaining to this information. I agree to release any person, company, or other institution from any and all cause of action that otherwise might arise from supplying SFSM with information if may request pursuant to this release.

I understand that acceptance of my offer to volunteer services to SFSM is contingent upon receipt of satisfactory responses to any or all investigations conducted by SFSM. I understand that any false answers or statements, or misrepresentations by omission, made by me on this application or any related document, will be sufficient for rejection of my application, or for my immediate discharge if discovered after I begin providing volunteer services.

I agree to comply with all applicable policies, procedures and rules of SFSM, and I understand that any violation may result in my immediate dismissal as a volunteer. I understand that nothing in this application, or in acceptance of my offer of to volunteer services, is intended to create an employment contract between SFSM and me.

I hereby grant the St. Francis Seraph Ministries permission to use my likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration. I understand and agree that all photos will become the property of the SFSM and will not be returned.

I hereby irrevocably authorize the SFSM to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

I hereby hold harmless, release, and forever discharge the SFSM from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I hereby acknowledge that I have read and understand the preceding statement.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete.

Name (printed)	
Signature	
Signature of Guardian if under 18	
Date	

Thank you for completing this waiver/application form and for your interest in working with us.