

2450 Miramar Blvd. Cleveland, Ohio 44118 216.932.0620

I am applying for the foll	owing Volunteer Positio	ns		-	
	-		ul witness of God's love for our stude		
completing this applicati	·	rotect our children	and, in that spirit, we ask your coope	eration in	
Name					
Address					
				-	
Email address				-	
Occupation/Vocation				-	
Have you previously volunteered with children? Yes No					
If yes, please describe yo	ur prior volunteer work	·			
	_	_	with children at another parish, pro	_	
organization?	Yes		No	-	
If yes, please explain					
The Diocese of Cleveland	I requires that all volunt	eers submit the nan	nes of 3 references. By providing the	ese references	
below, the applicant give	es permission to Gesu to	contact such refere	ences with regard to this application.		
Name		Daytime Phone	Relationship (friend, co	Relationship (friend, coworker, etc.)	
The Diocese of Claveland	Lalso requires that value	nteer applicants pro	vide fingerprints so that a criminal b	ackground	
	•		fety Services Office at John Carroll Ur	•	
Date of Application	This can be done thin	agir the campus sur	ee, services office actionic current of		