

Service Application

Mother Teresa House
P.O. Box 13004
Lansing, MI 48901
(517) 484-5494

Date: _____

Name: _____

Phone: (hm) _____

Address: _____

Phone: (wk) _____

E-mail: _____

Fax: _____

Place of employment: _____

How did you hear about Mother Teresa House? _____

What volunteer work have you done? (if any) _____

Have you been involved in hospice care? In what way? _____

Our mission is to give personal care to our terminally ill guests. Are you interested in giving hands on care? _____

Please list other gifts and capabilities you would like to contribute (anything from guitar playing, to computer programming, to people management, to meal preparation, to calligraphy etc...):

Please complete both pages.

How many hours per week/month might you be available? _____

Please indicate the times best for you:

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Morning _____							
Afternoon _____							
Evening _____							
Overnight _____							

Comments: _____

When can you begin? _____

Is there anything else you would like to tell us about yourself...interests, family, jobs, etc...?

Please provide 2 to 3 references and contact information. These may include employer, pastor or teacher.

1. _____
2. _____
3. _____

Please return this application to address on front. Then, you will receive a call soon to schedule orientation.