

Live-In, Service Application
Please complete and mail to:
Mother Teresa House
P.O. Box 13004
Lansing, MI 48901
(517) 484-5494

Name: _____ Date: _____

Address: _____ Phone: (hm) _____

_____ Phone: (wk) _____

E-mail: _____ Phone: (cell) _____

Place of employment: _____

Church: _____ Birth Date: _____

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

What does service mean to you and what role has it played in your life?

What makes this a good time to be a full-time Server?

What attracted you to Mother Teresa House?

What are your expectations about being a full-time Server at Mother Teresa House?

What kind of growth/challenges do you think this experience might hold for you? When faced with challenges how do you handle them? How could we help you with that?

Is there anything you cannot or are not willing to do that is normally done by volunteers?

Do you have any special physical or health needs?

What is your plan, including how to meet expenses, after fulfilling your commitment as a full-time Server at Mother Teresa House?

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

How long a commitment would you like to make as a full-time volunteer?

1) _____ 8 Month Fall to Spring Program

2) _____ Other

When would you like to begin/end

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

| | Name | Relationship | Phone number |
|----|-------|--------------|--------------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |