

Date Received

Placement

Volunteer Intent Form 2026-2027

Please complete and return this form to the office of Faith Formation as soon as possible.
E-mail to: religiondirector@stmarkparish.org

Name _____ Desired Partner _____

- I am returning.
- I am unable to return.

Desired Grade Level _____

Cell # _____ TEENS ONLY: Teen Cell _____ Teen Parent Cell _____

Address _____ City _____ Zip Code _____

E-Mail _____ Occupation _____
(We use email as our primary communication)

Teen Volunteers ONLY:

Teen Email: _____ Teen Parent Email _____

School Attending: _____ Grade Level: _____

- Under 18 Years of Age _____ (age)
- Over 18 Years of Age

If applicable:
Children attending our program:

Name: _____ Grade: _____

Grade: _____

Name: _____

Desired Session:

_____ Wednesday 6:00 - 7:30PM _____ Thursday 4:00 - 5:15PM

(1st grade to 6th grade until 7:15pm, 7th grade to High School until 7:30pm)

Desired Position: **Please see position descriptions on reverse side.**

_____ Catechist

_____ Co-Catechist

_____ Safety Team

_____ Permanent Substitute

_____ Hospitality Team

_____ Substitute Catechist

**All volunteers are required to be fingerprinted and participate in the Virtus program under direction of the Archdiocese of Miami. All volunteers will be trained in safety procedures, i.e. emergency and fire drills, inclement weather, etc.

Catechist- I understand my responsibilities include planning and presenting lessons, attending workshops and scheduled grade level meetings. I understand there are additional responsibilities for sacramental preparation classes. I am expected to arrive 20 minutes prior to class and stay after class assisting with the dismissal procedure for the duration of the Faith Formation calendar year.

Co-Catechist- I understand my responsibilities include *assisting* the catechist with the class, learning *how to* and *participating in* creating and presenting lessons, acting as substitute for lead catechist in their absence. I understand there are additional responsibilities for sacramental preparation classes. I am expected to arrive 20 minutes prior to class and stay after class assisting with the dismissal procedure for the duration of the Faith Formation calendar year.

Permanent Substitute Catechist- I understand that I would consistently attend one session weekly, receiving my class assignment upon arrival. The office of Faith Formation will provide an appropriate lesson plan.

Substitute Catechist- I understand that the office of Faith Formation will call me when the need for a substitute catechist arises. The office of Faith Formation will provide an appropriate grade level lesson plan upon my arrival.

Safety Team- I understand my responsibilities include assisting in monitoring the grounds and school, escorting children to the classrooms and to the main office in the Parish Center. I am expected to arrive one half hour prior to the session time and/or staying up to one half hour after class is over.

Hospitality Team- Assisting parents in sign-in and early release process.



Short Volunteer Application For a Teenager

I. PERSONAL INFORMATION

Please Print

Parish Number: _____
 Volunteer's Name: _____
 Parent's Name: _____
 Address: _____ Apt # _____
 _____ Zip _____
 Date of Birth: ____ - ____ - ____ Place of Birth: _____
 Home Phone: (____) ____ - ____ E-mail: _____
 Work Phone: (____) ____ - ____ Cellular Phone: (____) ____ - ____
 References 1: _____ Ph: _____ /
 References 2: _____ Ph: _____

II.- AGREEMENT AND SIGNATURES

Each volunteer has to read and sign the following agreement

The information that I have provided may be verified, if necessary, by contacting persons or organizations named in the application or by contacting any person or organization that may have information concerning me. I authorize, if it is necessary, to the Archdiocese of Miami, its employees and agents, to make inquiries, including criminal history, employment history and driving history. I hereby release and agree to hold harmless from liability any person(s) or organization, who, in good faith, provides information to complete a background investigation. I also agree to release and hold harmless the local parish, school, or other diocesan institution, the Archdiocese of Miami, the Archbishop, and the officers, employees and volunteers thereof from any present or future claim of any kind resulting from any alleged liability for conducting a background investigation which may include, but not limited to, criminal courts, state and county and national repositories of criminal records. Under the penalties of perjury, I declare that I have read the foregoing, and facts alleged are true to the best of my knowledge and belief..

PARENT PERMISSION

We, _____ & _____ (names of both parents)

the parents of _____ (volunteer's name)

wish and authorize our child to be a Volunteer in the Roman Catholic Church. We have read and we agreed with the above agreement. We hereby release Saint Mark Religious Education Program, Saint Mark Parish, the Archdiocese of Miami, all its employees and volunteers from all claims and judgments pertaining to my child helping as a Volunteer in this Parish.

Mother Signature

Father Signature

Volunteer Signature

Volunteer Application for Teenagers – Saint Mark the Evangelist Catholic Church

VOLUNTEER CODE OF CONDUCT I also declare that I have read the Volunteer Code of Conduct and have been given a copy for reference. Base on this Code, I promise that,

AS A VOLUNTEER, I WILL:

- ❖ Treat everyone with respect, loyalty, patience, integrity, courtesy, dignity and consideration.
- ❖ Avoid situations where I am alone with children and/or youth at Church activities.
- ❖ Use positive reinforcement rather than criticism, competition, or comparison when working with children and/or youth.

- ❖ Refuse to accept expensive gifts from children and/or youth without prior written approval from the parents or guardian and the pastor or administrator.
- ❖ Report suspected abuse to the pastor, administrator, or appropriate supervisor and the abuse hotline –1- 800-96- ABUSE. (1-800-962-2873). I understand that: do not report a suspected abuse to the authorities is according the law, a minor crime.

- ❖ Cooperate fully in any investigation of abuse of children and/or youth.

AS A VOLUNTEER, I WILL NOT:

- ❖ Smoke or use tobacco products in the presence of children and/or youth.
- ❖ Use, possess, or be under the influence of alcohol at any time while volunteering. Y Use, possess, or be under the influence of illegal drugs at any time.
- ❖ Pose any health risk to children and/or youth (i.e. no fevers or other contagious situations).
- ❖ Strike, spank, shake, or slap children and/or youth.
- ❖ Humiliate, ridicule, threaten, or degrade children and/or youth.
- ❖ Touch a child and/or youth in sexual or other inappropriate manner.
- ❖ Use any discipline that frightens or humiliates children and/or youth.
- ❖ Use profanity in the presence of children and/or youth.

I Understand that any action inconsistent with the above or with the Volunteer Code of Conduct or failure to take action mandated by the Code of Conduct may result in my removal as a volunteer with children and/or youth.

Volunteer's Printed Name Volunteer's Signature Date

Signature of Pastor or Safe Environment Coordinator