THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS

Long-Term Volunteer for Church Service

(Church-Service Missionary Program)

Instructions: After clarifying the need for and duties of the assignment with the supervisor of the department or organization where he or she would like to serve, the prospective volunteer completes this form up to and including his or her signature and submits it to the bishop. The bishop completes his section and mails or faxes the form to the Church-service missionary coordinators. Call 1-801-240-4914 if you have any questions.

Important: Please enter or	r clearly print all a l	oplicable inforr	nation.				
Personal Information							
Name (last, first, middle)				Membership record number			
Home address (street and number, city, state or province, postal code)					LDS Account user name		
Birth date (month/day/year)	Marital status						
Birth date (month) day/year/		Sex Male	☐ Male ☐ Female			☐ Married ☐ Single	
Home phone (with area code)	Cell phone (with	area code)	Email addres	SS			
Ward or branch name			Unit number				
Native language	Other language	Speak		Read		Write	
rvative language	Other language	•	I □ Fair	Good □	∏ Fair	Write ☐ Good ☐ Fair	
name of person to notify in case	or emergency	Relation	snip		Phone	e (with area code)	
Assignment Information			-				
Operation where volunteer will serve			Supervisor	Supervisor			
Location			Job title				
Start date	Length of service	Length of service (in months)		Release date		Average weekly hours	
Agreement and Signature of the	e Volunteer						
As a volunteer to The Church of Jesus Christ of Latter- I further acknowledge that I am physically and m							
day Saints, I understand t	capable to fill the position of this volunteer service.						
Church, nor will I receive or other employment bene service. I further understa for all expenses pertaining transportation, and so forther transportation.	I also authorize The Church of Jesus Christ of Latter-day Saints and its affiliated entities to collect, process, and transfer to other countries my personal information as may be required for Church purposes and in accordance with the Church's records management and confidentiality policies.						
Signature of volunteer				Date			
Bishop's or Branch President's qualified to serve as a long-term			signing this form	, you are certif	ying that tl	he candidate is capable and	
Printed name of bishop or branch president			Ward or bran	nch name		Unit number	
Signature of bishop or branch president			Date		Candida	ate's membership record is annotated	