



Mentor/Volunteer Application

Please utilize the back side of this form for additional explanation(s)

Name: _____
(last) (first) (middle)

Address: _____
(street address) (city) (state) (zip)

Phone: _____ Alternate Phone: _____ E-mail Address: _____

Are you 21 years or older? Yes/No

Do you have a valid driver's license? Yes/No

Do you have a car? Yes/No

Have you ever been convicted of a felony? Yes/No
Answering yes will not necessarily exclude you from consideration.

If yes, please explain further on back:

Are you a Christian? Yes/No If yes, what church do you attend?

Name: _____ Address: _____

Pastor: _____ Telephone: _____

Why do you think you would make a good volunteer for Crossing Home? _____

I learned of Crossing Home and this volunteer opportunity through: _____

The following people may be considered for references:

Professional Reference

Personal Reference

Name: _____

Name: _____

Relationship: _____

Relationship: _____

E-mail Address: _____

E-mail Address: _____

Phone Number: _____

Phone Number: _____

1315 Portland Ave S
Minneapolis, MN 55404

Signature: _____ Date: _____

Please return the completed application to Crossing Home
1315 Portland Avenue South, Minneapolis, MN 55404
or e-mail to info@crossinghome.org