



# VOLUNTEER APPLICATION

*Thank you for your interest in serving with Mentoring with Horses LLC (MWH).*

MWH is a Christ-centered equine-assisted mentoring organization serving young people ages 12 & up. This application helps us understand your interests, experience, availability, and suitability for volunteer service. Completion of this form does not guarantee placement. Certain roles may require references, background screening, role-specific training, skills verification, or additional documentation.

## 1. APPLICANT INFORMATION

|                                           |                                                                                            |
|-------------------------------------------|--------------------------------------------------------------------------------------------|
| Full Legal Name                           |                                                                                            |
| Preferred Name                            |                                                                                            |
| Date of Birth                             | _____ Age: _____                                                                           |
| Street Address                            |                                                                                            |
| City / State / ZIP                        |                                                                                            |
| Primary Phone                             |                                                                                            |
| Email                                     |                                                                                            |
| Preferred Contact                         | <input type="checkbox"/> Call <input type="checkbox"/> Text <input type="checkbox"/> Email |
| Occupation / Employer                     |                                                                                            |
| Church / Community Affiliation (optional) |                                                                                            |

## 2. EMERGENCY CONTACT

|                 |  |
|-----------------|--|
| Name            |  |
| Relationship    |  |
| Primary Phone   |  |
| Alternate Phone |  |

## 3. VOLUNTEER INTERESTS

Please check all areas that interest you. Final assignments are made by MWH based on training, experience, safety, program needs, and fit.

- ☐ Program Support ☐ Horse Handler / Leader ☐ Participant Support  
☐ Facility / Herd Support ☐ Hospitality ☐ Administrative Support  
☐ Outreach / Community Events ☐ Photography / Video ☐ Marketing / Communications  
☐ Carpentry / Maintenance ☐ Fundraising / Grant Support ☐ Other: \_\_\_\_\_

### Programs of interest:

- ☐ Discipleship with Horses (DWH) ☐ Serenity Horse Encounters (SHE) ☐ Other approved MWH programs



#### 4. AVAILABILITY & COMMITMENT

|                         |                                                                                                                                                                                                            |
|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Days Available          | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun |
| Typical Availability    | <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening <input type="checkbox"/> Flexible                                                                     |
| Frequency               | <input type="checkbox"/> Weekly <input type="checkbox"/> Twice monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Occasional / Events                                                       |
| Start Date Available    |                                                                                                                                                                                                            |
| Known Scheduling Limits |                                                                                                                                                                                                            |

**For recurring mentoring programs, consistency matters.** If assigned to a recurring DWH time slot, are you willing to make a dependable commitment for the season?

☐ Yes ☐ No ☐ Unsure / Need to discuss

#### 5. EXPERIENCE & SKILLS

##### Experience with horses (check all that apply):

- ☐ None ☐ Beginner ☐ Comfortable around horses ☐ Experienced handler  
☐ Grooming ☐ Leading ☐ Groundwork ☐ Mounted instruction  
☐ Horse care / barn work ☐ Training / behavior ☐ Other: \_\_\_\_\_

Briefly describe your horse experience, including years, settings, and responsibilities:

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##### Experience working with youth / teens / young adults:

- ☐ None ☐ Parenting ☐ Church / youth ministry ☐ Education  
☐ Mentoring ☐ Coaching ☐ Counseling / helping profession ☐ Special needs / neurodiversity  
☐ Other: \_\_\_\_\_

Please describe relevant experience:

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Other skills, certifications, licenses, training, or professional experience that may benefit MWH:

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#### 6. PERSONAL FIT & MOTIVATION

Why are you interested in volunteering with Mentoring with Horses?

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What strengths do you believe you would bring to the MWH volunteer team?

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MWH is intentionally Christ-centered and integrates Christian values, Scripture, prayer, and discipleship principles into its programs. Are you comfortable serving in and respectfully supporting that environment?

☐ Yes ☐ No ☐ I would like to discuss this before serving

Is there anything MWH should know that may affect your ability to serve safely or reliably in the role(s) you selected?

*Please do not disclose unnecessary medical details. We only need information relevant to safe role placement.*

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## 7. REFERENCES

Please provide two non-family references who can speak to your character, reliability, work with youth, ministry service, horse experience, or volunteer suitability.

|             | Name | Relationship | Phone | Email |
|-------------|------|--------------|-------|-------|
| Reference 1 |      |              |       |       |
| Reference 2 |      |              |       |       |

## 8. SAFETY, BACKGROUND & ELIGIBILITY

Because MWH serves minors and operates around horses, volunteers may be subject to role-appropriate screening and safety requirements. Please answer accurately.

Have you ever been dismissed, suspended, or asked to resign from a job, ministry, school, youth program, volunteer role, or organization for misconduct, boundary concerns, safety concerns, or inappropriate behavior?

☐ No ☐ Yes — please explain below

Have you ever been convicted of, pleaded guilty/no contest to, or currently have pending any criminal offense other than a minor traffic violation?

☐ No ☐ Yes — please explain below

Have you ever been the subject of a substantiated finding, protective order, professional discipline, or investigation involving abuse, neglect, exploitation, harassment, violence, sexual misconduct, or harm to a child or vulnerable person?

☐ No ☐ Yes — please explain below

Is there any other circumstance that could reasonably affect MWH's decision to place you in a youth-facing, horse-facing, driving, financial, or confidential-information role?

☐ No ☐ Yes — please explain below

If you answered Yes to any question, please explain. A Yes answer does not automatically disqualify an applicant; MWH will consider the nature, relevance, timing, and circumstances.

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## 9. DRIVER INFORMATION — ONLY IF DRIVING MAY BE PART OF YOUR ROLE

|                        |  |
|------------------------|--|
| Driver's License State |  |
| License Expiration     |  |
| Auto Insurance Company |  |

☐ I am not applying for / expecting a driving role.

*Do not provide a driver's license number on this general application. MWH may request it later through a separate secure process if a driving role requires verification.*

## 10. APPLICANT ACKNOWLEDGMENT & AUTHORIZATION

- I certify that the information I have provided is true and complete to the best of my knowledge.
- I understand that submitting this application does not guarantee acceptance, placement, a particular role, schedule, or duration of volunteer service.
- I authorize MWH to contact the references listed above and to verify information relevant to my volunteer application.
- I understand that, depending on the role, MWH may require additional screening, including a criminal-background check, sex-offender registry check, driving-record review, reference checks, or other lawful screening. I understand that any required authorization or legally required notices will be provided separately before such screening is conducted.
- I agree that, if accepted, I will complete required orientation and role-specific training; follow the MWH Volunteer Handbook, safety rules, confidentiality requirements, participant-boundary expectations, horse-welfare practices, and directions of the MWH leader in charge.
- I understand that volunteer service is unpaid and does not create an employment relationship.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Parent / Guardian Signature (if applicant is a minor and MWH permits minor volunteers):

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

## MWH USE ONLY

|                                  |                                                                                                         |
|----------------------------------|---------------------------------------------------------------------------------------------------------|
| Date Received                    |                                                                                                         |
| Interview / Conversation Date    |                                                                                                         |
| References Checked               | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required          |
| Background Screening             | <input type="checkbox"/> Cleared <input type="checkbox"/> Pending <input type="checkbox"/> Not Required |
| Approved Role(s)                 |                                                                                                         |
| Restrictions / Notes             |                                                                                                         |
| Orientation Completed            |                                                                                                         |
| Role-Specific Training Completed |                                                                                                         |
| Approved By                      |                                                                                                         |
| Status                           | <input type="checkbox"/> Approved <input type="checkbox"/> Hold <input type="checkbox"/> Not Placed     |