

# Loma Linda Broadcasting Network

## Volunteer Application Form



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

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone number: \_\_\_\_\_ (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (other)

Email: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Languages spoken and fluency: \_\_\_\_\_

Interested in:  Short term commitment  Long term commitment

Time frame availability, number of hours per day, week or month, days of the week, Saturdays: \_\_\_\_\_

Briefly state the reason you want to become a volunteer for LLBN: \_\_\_\_\_

### Check the area(s) where you would like to provide volunteer service:

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> Camera              | <input type="checkbox"/> Set-Up           | <input type="checkbox"/> Social Media      | <input type="checkbox"/> Building Maintenance |
| <input type="checkbox"/> Audio               | <input type="checkbox"/> Engineering      | <input type="checkbox"/> Writing           | <input type="checkbox"/> Translation          |
| <input type="checkbox"/> Lighting            | <input type="checkbox"/> Encoding         | <input type="checkbox"/> Graphic Design    | <input type="checkbox"/> Guest Relations      |
| <input type="checkbox"/> Graphics Operations | <input type="checkbox"/> Video Operations | <input type="checkbox"/> Secretarial Work  | <input type="checkbox"/> Communications       |
| <input type="checkbox"/> Directing           | <input type="checkbox"/> Website          | <input type="checkbox"/> Food Coordination | <input type="checkbox"/> Wherever Needed      |
| <input type="checkbox"/> Video Editing       | <input type="checkbox"/> Data Entry       | <input type="checkbox"/> Prayer Ministry   | <input type="checkbox"/> Other: _____         |

Special skills/training/interests or areas of expertise: \_\_\_\_\_

Educational/Work background: \_\_\_\_\_

Religious affiliation/denomination: \_\_\_\_\_

Contact in an emergency: \_\_\_\_\_ Telephone number: \_\_\_\_\_

*I understand this is strictly a volunteer ministry and not an employment opportunity. I received and read LLBN's Code of Conduct and I agree to follow it. By typing my name in the signature box below, I acknowledge that I have read and agree to all information contained and that this will serve as my true signature.*

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

Please return form to [volunteer@llbn.tv](mailto:volunteer@llbn.tv)

Thank you for your interest to work as a volunteer for LLBN! We will be in touch with you shortly.

**ENGLISH | ARABIC | CHINESE | LATINO | SOUTH ASIA**

**LIGHTING LIVES, BLESSING NATIONS**

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