



# Christian Assistance Bridge Volunteer Information Packet

## **Our Mission**

Christian Assistance Bridge is a non-profit agency that exists to provide hope and support to those in need in our community through a collaborative effort of businesses, local churches and civic organizations, individuals and other support agencies. This faith-based organization represents Christian values, discipleship and service. By joining efforts, we will strengthen our mission and our faith, as well as the faith of those we serve.

## **Who We Are**

Christian Assistance Bridge reaches out to those who find themselves in a crisis situation—facing eviction, utility cut-off, homelessness or food and necessities shortages. Since 2013, Christian Assistance Bridge has been serving the communities of Blythewood (29016), Ridgeway (29130) and northeast Richland County (29229). The office is operated by two, part time staff and volunteers.

## **Volunteer Opportunities**

- *Food Pantry:* Our food pantry is available for anyone who is in need of food. Whether it is food for one individual or for an entire family, we pack and fill boxes for these folks in their time of need. A food pantry volunteer also stocks shelves and keeps the pantry organized, according to industry standards and guidelines.
- *Client Intake Counselor:* Financial assistance is offered to those who qualify for emergency help. Each client meets with a trained volunteer to confidentially discuss their situation. Assistance includes help with payment of utilities, rent, travel aid (gas, lodging) and prescription medications.

- *Benefit Bank Counselor:* Low income South Carolina residents can apply for a variety of government benefits from multiple agencies via the Benefit Bank application process. Benefit Bank counselors spend up to an hour with clients, assisting them with this application process. Special training is required.
- *Skilled Professionals:* We are always looking for folks who can offer their skill or profession: public relations, marketing, grant writing, fundraising, public speaking, event planning, IT, legal and accounting.
- *Greeter:* During office hours, a greeter welcomes clients when they walk through our doors. The greeter is also responsible for ensuring that the proper paperwork has been completed by the client. Greeter also answers the phone and checks for messages.
- *Donations:* Nonperishable food items that have not yet expired can be brought to our location during normal business hours or during another prearranged time. We also accept toiletry items and seasonal items (school supplies) and gift cards to grocery and big box stores. *NO CLOTHING OR HOME GOODS PLEASE.*
- *Other:* Our volunteer needs change throughout the year and special projects may arise at any time. If you or a local group (church, scouts, civic organization, etc.) are interested in temporarily volunteering your time with us, please call to see what opportunities we may have available.

Christian Assistance Bridge seeks to find committed volunteers who are willing to serve the needs of those in our community with an open mind and heart. We match our volunteers to an area where their skills and/or interests are best suited for our organization. All volunteer information is kept confidential. Thank you for your interest in serving as a CAB volunteer.

*“May the Lord make your love increase and overflow for each other and for everyone else, just as ours does for you.”*

1 Thessalonians 3:12

**Contact Information**

Executive Director: Lauren Wells  
lauren.wells@christianassistancebridge.com

Hours: Mondays and Thursdays  
9:00 am—1:00 pm

Location: Christian Assistance Bridge  
126 Blythewood Road  
Blythewood, SC 29016

Mailing Address: P.O. Box 1026  
Blythewood, SC 29016

Phone: (803)786-1903  
Fax: (803) 786-1904

Email: info@christianassistancebridge

Website: [www.christianassistancebridge.com](http://www.christianassistancebridge.com)

# Christian Assistance Bridge Volunteer Application

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

Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

Home Address:

\_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Please list any known medical conditions in case of an emergency:

\_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Position of Interest: (Please Check One)

Food Pantry

Client Intake Counselor

Benefit Bank Counselor

Greeter

Skilled Professional (Please List): \_\_\_\_\_

Other: \_\_\_\_\_

Why do you want to be a volunteer at CAB?

\_\_\_\_\_  
\_\_\_\_\_

What previous volunteer experiences do you have? Briefly describe.

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Special interests/hobbies: \_\_\_\_\_

### References

1. Please list the names and addresses of three persons who can serve as a reference for your character and reputation. Please list only those who you have known two years or longer. Do not list relatives. Give complete information.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: (Work) \_\_\_\_\_ (Home) \_\_\_\_\_  
Email Address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: (Work) \_\_\_\_\_ (Home) \_\_\_\_\_  
Email Address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: (Work) \_\_\_\_\_ (Home) \_\_\_\_\_  
Email Address: \_\_\_\_\_

2. List other volunteer experience:

Organization _____	# of Years _____
Organization _____	# of Years _____

Background Information

Education: High School: \_\_\_\_\_ State: \_\_\_\_\_  
College (School and Degree): \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

Have you ever been in the military?  Yes  No  
If so, what branch and capacity? \_\_\_\_\_

Have you ever been arrested and/or convicted of a crime?  Yes  No  
If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Publicity Waiver: I give Christian Assistance Bridge permission to use my image and likeness in all marketing, publicity materials and social media posts to promote Christian Assistance Bridge programs and events.

Yes  No

Signature: I declare that the above information that I have provided to Christian Assistance Bridge in this volunteer application is true. I also understand that any information that I learn and receive about the clients with whom I am volunteering will be kept confidential. I also understand that all information on this application will remain confidential by Christian Assistance Bridge, unless otherwise required by law.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date