



## VOLUNTEER APPLICATION

### CHECKLIST

Application process will begin when we receive the following documents:

(Please send all documents at one time.)

1) The following documents must be e-mailed directly to [recruiting@sunranch.org](mailto:recruiting@sunranch.org):

- 1) Application
- 2) Resume or CV
- 3) 2 Reference letters (not relatives)

2) The following documents must be e-mailed directly to Diana de Winton at [HRAdmin@sunranch.org](mailto:HRAdmin@sunranch.org):

- 1) Background Information form (**must be signed by hand per legal requirements**)
- 2) Drug Policy (**must be signed by hand**)

**Note:** For your confidentiality, do not send the signed background check and drug policy to anyone other than Diana de Winton at [HRAdmin@sunranch.org](mailto:HRAdmin@sunranch.org).

Diana will then run the background check and file the drug policy. Once this is complete, we will be in touch with the next steps.

Thank you!



## Honoring Universal Being The Philosophy of Sunrise Ranch

Sunrise Ranch honors Universal Being in all its forms—through people, through nature and through all creation. We see this attitude of honor for Universal Being as the pivotal factor for the future of humanity.

Most of all, we honor and welcome the expression of Universal Being through ourselves. We believe that this orientation in living is what opens the door for a full knowing of the wisdom and love that is within everyone. It is what lets the individual give their greatest gift to the world and know the greatest fulfillment that is possible for a human being.

All of Sunrise Ranch is dedicated as a teaching and demonstration site for this essential wisdom—both the inner knowing of Universal Being and the practical application of that knowing. This is why we practice and teach sustainable agriculture and farm-to-table food preparation. This is what is behind all the workshops, conferences, concerts and courses that we offer. This is what we teach in our internship programs and in all our courses for spiritual awakening and personal development. Sunrise Ranch exists to embody this truth and to bring it to the world.

We believe that Universal Being is doing its best to incarnate and express fully through each person, not as a separate reality but as the core reality of who they are. And when it does, that person becomes whole and creates wholeness in their world. They bring healing to the land, to other people and to the planet. Whole people—whole world.

This is what allows our individual worlds to thrive. This is why Sunrise Ranch is flourishing. And it is the experience of this simple, profound truth that will let Planet Earth become the garden home that it is destined to become.

To us, this is not just a nice idea but a guiding principle to be embodied in everything we do. If you agree, we welcome you to join with us in bringing this experience to the world.



## VOLUNTEER APPLICATION

### CONTACT DETAILS

First Name:	Last Name:	Gender:
Date of Birth:	Age:	SSN:
Street Address:	City:	State: Zip:
Telephone:	Mobile:	Email:

### EMERGENCY CONTACT DETAILS

First Name:	Last Name:	Relationship:
Street Address:	City:	State: Zip:
Telephone:	Mobile:	Email:

### BACKGROUND INFORMATION

Have you been convicted of any felony or misdemeanor within the past ten years? Yes or No:

If yes, please list the date and offense(s):

### DIETARY NEEDS (if any check all that apply)

☐ Vegetarian   ☐ Vegan   ☐ Gluten Free   ☐ Dairy Free   ☐ Soy Free

Additional information: [Click here to enter text.](#)

The information provided in this application will be kept confidential and used only for purposes of volunteer verification.

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application (and the documents included in the CHECKLIST) as may be necessary to arrive at a volunteer decision. I hereby release Sunrise Ranch/Emissaries of Divine Light and any former employer and any third party from any liability whatsoever that may be imposed as a result of the release of such information. Should I be a volunteer at Sunrise Ranch /Emissaries of Divine Light any false or misleading information will result in my volunteer status being immediately terminated.

I hereby understand and acknowledge that any volunteering relationship with Sunrise Ranch/Emissaries of Divine Light is of an "At-Will" nature, which means that the Volunteer may resign at any time and Sunrise Ranch may discharge the Volunteer at any time, with or without notice, with or without cause. It is further understood that this "At-Will" volunteer relationship may not be changed by any written document or by verbal agreement unless such change is specifically acknowledged in writing by an authorized Executive of Sunrise Ranch/Emissaries of Divine Light.

Participating in the volunteer activities affords a unique opportunity to develop skill in coordinating and harmonizing with others in offering a potent positive influence into the community and the larger world creating a strong sense of selfless service.

Signature:

Date:

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## VOLUNTEER POSITIONS

**Please select the position(s) that interests you:**

- ☐ Dishes
- ☐ Cook
- ☐ Homekeeping
- ☐ Other \_\_\_\_\_

### Dishes

The dish shifts are 2 hours long and have at least 3 staff on each shift. We ask that the dish personnel have the ability to work in a fast paced environment, follow direction accurately, and to be able to work independently as needed. The dish duties consist of washing dishes, cleaning counters, and organizing and putting away dishes.

### Cook

We ask that the cooking personnel have previous experience in kitchen settings and are comfortable in fast paced environments, taking direction, and following direction accurately. The cooking personnel will help to prepare food, serve food, replenish the serving line as needed, assist in cleaning the kitchen, and assist the head chef in other areas as needed.

### Homekeeping

The homekeeping position is responsible for the general appearance and order of the facility. Other responsibilities include making beds, folding laundry, cleaning bathrooms, vacuuming carpets, and maintaining cleanliness of pool and hot tub area.



## DETAILS

There is no hourly work commitment, just what you're willing to offer on a consistent basis. The work will be in support of community operations. Participant receives at least one meal per day.

I understand work schedule, and other activities are subject to change.

In applying to this volunteer program, I understand and commit to participating in all work shifts. I realize that my prompt attendance, along with excellence in the quality of my energy, is a vital contribution to my personal and educational growth.

Participating in the work activities affords a unique opportunity to develop skill in coordinating and harmonizing with others in offering a potent influence into the community and the larger world creating a strong sense of selfless service.

SUBSTANCES which are illegal under either state or federal laws will not be used, distributed, or possessed on Sunrise Ranch premises by people who visit, live and/or work on Sunrise Ranch. Such substances include but are not limited to marijuana and prescription medications not prescribed for the person possessing them.

UNDER-AGE DRINKING – Alcohol will not be served or consumed by visiting, living and/or working persons under the legal age for drinking in the State of Colorado, which is currently 21.

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



## LETTER OF INTENT

Please **be as detailed as possible** so we may better understand your intention of volunteering at Sunrise Ranch. Attach a separate sheet if needed.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

- 1) How did you hear about Sunrise Ranch?
  
- 2) What experience do you have related to Sunrise Ranch, its philosophy, and its programs?
  
- 3) What passion would you bring to the community of Sunrise Ranch?
  
- 4) Requested volunteering dates and times? Please include any vacation days or holidays you're requesting off.



## MEDICAL PROVIDER INFORMATION

Sunrise Ranch does not accept responsibility for medical procedures, medical appointments, or fees incurred while not on work related tasks by anyone participating in the volunteer program. Please include all details of your personal provision for normal and emergency medical care with this application.

Injuries sustained during the execution of work related activities with the volunteer program are covered by our group accident policy.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Health Insurance Provider:

Policy Number:

Phone Number of Insurance Carrier:

Email of Insurance Carrier:

Name of Person to Contact in Case of Emergency:

Relationship:

Street Address:

City:

State:

Telephone:

Mobile:

Email:

If you do not have a personal insurance plan, please read and sign the following statement:

I understand that I am **not eligible** to participate in the Sunrise Ranch self-insurance plan.

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





## VOLUNTEER PERSONAL RELEASE

You are about to enter a cycle that may push your physical, mental, and emotional capacities to strenuous limits. In the interest of providing information that will assist the Sunrise Ranch leadership in properly enfold you during this time, please complete this form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Primary Physician: \_\_\_\_\_ Telephone: \_\_\_\_\_

Please describe any current limitations or issues that you have experienced in the last six months in any of the following areas:

Physical:

Mental:

Emotional:

Have you been under the care of a physician in the last 12 months?

☐ Yes      ☐ No

If yes, please describe the condition(s) for which you were seen:

Have you been hospitalized or had emergency care for medical or psychiatric conditions in the last 12 months?

☐ Yes      ☐ No

If yes, please describe:

Are you currently taking prescribed medications or using recreational drugs?

☐ Yes      ☐ No

If yes, please list and identify purpose:

Do you have physical limitations which restrict your ability to lift a weight of 10 -15 pounds?

☐ Yes      ☐ No

If yes, please describe your physical limitation:

Do you have any allergies or medical conditions that require a special diet?

☐ Yes      ☐ No

If yes, please list the foods that you may not eat.

**My signature confirms that the above information is factual.**

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



## Background Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Physical Address \_\_\_\_\_

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

Home phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Drivers License \_\_\_\_\_

Are you a U.S. citizen? Yes \_\_\_\_\_ No \_\_\_\_\_

If not, please give the following information:

Country of citizenship \_\_\_\_\_ Current passport # \_\_\_\_\_

Personal References/Contacts:	Name	Address	Phone
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Previous addresses for the past seven years:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_

## Work History

May we contact your previous employers? Yes \_\_\_\_\_ No \_\_\_\_\_

Current employer: (Name, address & phone number) \_\_\_\_\_  
\_\_\_\_\_

Employer(s) for the past 5 years	Name	Address	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you been convicted of any felony or misdemeanor within the past ten years?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list the date and offence:

I understand that Sunrise Ranch or Emissaries of Divine Light may undertake a routine criminal background check. By checking this box and completing this form I give consent to a background check.  
\_\_\_\_\_ Yes \_\_\_\_\_ No, I do not give my consent

FCRA NOTICE AND ACKNOWLEDGMENT  
IMPORTANT – PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT

NOTICE REGARDING BACKGROUND INVESTIGATION

SUNRISE RANCH/EMISSIONS OF DIVINE LIGHT may obtain information about you from a consumer report agency for employment purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include, but is not limited to: employment and education verifications; social security number verification; criminal and civil court records; personal interviews; driving records; and/or any other public records or any other information bearing on your character, general reputation, personal characteristics and trustworthiness. These reports may be obtained at any time after receipt of your authorization and, if you are selected, throughout your affiliation with Sunrise Ranch/Emissions of Divine Light. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report.

The report will be generated by **ChristianBackgroundchecks.com** (1200 South Outer Road, Blue Springs, MO 64015 / 816-228-5255) or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing Sunrise Ranch/Emissions of Divine Light to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are selected, throughout your affiliation with Sunrise Ranch/Emissions of Divine Light to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION (above) and a SUMMARY OF YOUR RIGHTS UNDER THE FIAR CREDIT REPORTING ACT (separate document) and certify that I have read and understand both of these documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” at any time after receipt of this authorization and, if I am selected, throughout my affiliation with Sunrise Ranch/Emissions of Divine Light. To this end, I hereby authorize without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer or insurance company to furnish any and all background information requested by **ChristianBackgroundchecks.com**, another outside organization acting on behalf of Sunrise Ranch/Emissions of Divine Light, and/or Sunrise Ranch/Emissions of Divine Light itself. I agree that a facsimile (“fax”) or photographic copy of this Authorization shall be as valid as the original.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_



## **Sunrise Ranch/Emissaries of Divine Light**

### **Illegal Substance and Under-Age Drinking Policy**

We ask you to make this agreement for three reasons. The first is that we are a non-profit organization. If illegal substances are found on the property, our tax status and reputation could be in jeopardy. The second reason is for safety on the job site. The third is because of the culture and atmosphere we would like to create as a community. We want our camaraderie and friendships to be free of illegal substances.

**Substances** which are illegal under either state or federal laws will not be used, distributed, or possessed on Sunrise Ranch premises by people who visit, live and/or work on Sunrise Ranch. Such substances include but are not limited to marijuana and prescription medications not prescribed for the person possessing them.

**Under-Age Drinking** – Alcohol will not be served or consumed by visiting, living and/or working persons under the legal age for drinking in the State of Colorado, which is currently 21.

This policy applies to all people visiting, living and/or working on Sunrise Ranch, the international headquarters of Emissaries of Divine Light. Because we are committed to providing a drug-free environment for our visitors, residents, and staff, your agreement and your support of this policy are required for you to visit, live and/or work on this property.

If a Sunrise visitor, resident and/or employee is suspected of violation of this policy, the following may be required: counseling, mentoring, drug-testing and treatment. Eviction, employment termination and/or notification of the authorities may also be required.

I, \_\_\_\_\_ (print name), have read this policy. I understand it and agree to it. I will support it and abide by it as long as I am associated with Sunrise Ranch as a visitor, resident and/or employee.

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Signature of Visitor, Resident or Employee

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Date



For good and valuable consideration, the receipt of which is hereby acknowledged, I, \_\_\_\_\_, hereby authorize Sunrise Ranch permission to use my likeness and/or voice in photographs, video recordings, and/or voice recordings (collectively, "Released Media") in any and all of its publications and websites, including but not limited to all Sunrise Ranch's printed and digital publications. I understand and agree that any such Released Media will become property of Sunrise Ranch and will not be returned.

I hereby irrevocably authorize Sunrise Ranch to edit, alter, copy, exhibit, publish or distribute the Released Media for purposes of publicizing Sunrise Ranch's programs or for any other related, lawful purpose. In addition, I waive the right to inspect or approve the finished product of the Released Media. Additionally, I waive any right to royalties or other compensation arising or related to the use of the Released Media.

I hereby hold harmless and release and forever discharge Sunrise Ranch from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

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

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

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

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

*(Signature of guardian if under 18 years of age)*