

The Spirit Research Society

...Seeking to Explain the Spirit World

Applicant Information

Full Name: *Last* *First* *M.I.* Date:

Address: *Street Address* *Apartment/Unit #*

City *State* *ZIP Code*

Home Phone: E-mail Address:

Cell Phone:

Emergency Contact Phone: E-mail Address:

Date Available: :

Position Applying for:

Do you understand this is a volunteer based position? YES NO

You do understand that you will not be paid for your volunteered time? YES NO

Are you a citizen of the United States? YES NO If no, are you authorized to volunteer in the U.S.? YES NO

Have you ever volunteered for this Paranormal group previously? YES NO If so, when?

Have you ever been convicted of a felony? YES NO

If yes, please explain:

References

Please list two references.

Full Name: Relations hip:

Company: Phone:

Address:

Full Name: Relations hip:

Company: Phone:

Address:

Previous Paranormal Groups

Have you volunteered or worked for another Paranormal group? YES No If so, please list the following:

Group or Organization Name: Phone: ()

Name of Boss or contact: City: State:

Address: Email Address of contact:

Web Site URL: : :

Volunteer/Work Title: : :

Responsibilities:

From: _____ To: _____ Reason for Leaving: _____
May we contact your previous boss or contact for a reference? YES NO

Group or Organization Name:

Name of Boss or contact: _____ Phone: () _____

Address: _____ City: _____ State: _____

Web Site URL: _____ Email Address of contact: _____

Volunteer/Work Title:

Responsibilities:

From: _____ To: _____ Reason for Leaving: _____
May we contact your previous boss or contact for a reference? YES NO

Investigations / Equipment

If you don't have any previous experience with investigations or your applied position, it's ok, we just need to know where to start to train you.

Do you have any experience with investigations? YES NO

If so, how many have you done?

Do you have any experience with equipment?

Do you have any equipment? YES NO

If so, please list here:

Are you willing to travel up to 50 miles or more if needed? YES NO

Do you believe in Spirits, ghosts, etc.? YES NO

Are you a skeptic? YES NO

Monthly meetings are mandatory. Will you be able to attend either in person or online? YES NO

Specialties

Do you have any specialty skills? Photography, Video, Psychic, etc. YES NO

If so, please explain:

Do you consider yourself to have some psychic ability? YES NO

If so, please explain:

If you have any abilities or knowledge that you think might benefit the Society? YES NO

If so, please explain:

Why do you want to become a member and/or investigator with The Spirit Research Society?

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. In addition, I give my permission to The Spirit Research Society to conduct a background check for the protection and safety of staff and clients.

If this application leads to employment as a volunteer for The Spirit research Society, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____

Date: _____

