



Facilities Steward

Mission Statement	Women's Resource Medical Center of Southern Nevada exists to save the lives of unborn children by sharing the love of Jesus Christ through spiritual, physical, emotional and educational support of our clients.
Objective	Support staff and the ministry by maintaining WRMCSN's facilities with integrity and attention to detail. Bring cleanliness and order to areas not within cleaning crew's scope of work.
Key Responsibilities	<ul style="list-style-type: none"> • Perform a variety of cleaning activities such as wiping down counters, tables, and chairs • Ensure rooms are cared for and ready for next day of business • Keep kitchen area organized • Maintain Atrium • Ensure all small appliances and equipment is off for the night • Notify Executive Assistant via email on any damages or repair needs • Check stocking levels of supplies and notify Executive Assistant • Water plants in rooms
Reports to	<ul style="list-style-type: none"> • Training Manager
Personal Development	<ul style="list-style-type: none"> • Personal relationship with Jesus Christ as Lord and Savior • Continued personal education of God's Word
Skills and Qualifications	<ul style="list-style-type: none"> • Personal, professional and public integrity • Good cleaning skills • Servant-hearted • Ability to take direction well & work independently • Ministry experience and/or community involvement (a plus)
Requirements	<ul style="list-style-type: none"> • Completion of WRMCSN application / forms / releases • In agreement with WRMCSN statements: Mission/Faith/Vision/Commitment/Principal/Care • Membership/Fellowship in a local church • Adherence to all applicable policy and procedures of WRMCSN • Walk through / Tour with Executive Assistant for training
Time Commitment	<ul style="list-style-type: none"> • Available early evenings or Saturday afternoons (preferred) • Minimum of 8 hours per month • 3, 6, or 12 month commitment



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I understand the responsibilities and qualifications of this position, and agree to fulfill them to the best of my ability and that I will receive support and appreciation from WRMCSN staff.

Volunteer name (Please print)

Volunteer Signature

Date

WRMCSN Staff Partner (Please print)

WRMCSN Staff Partner Signature

Date