



Please
Insert
Recent
Photo
Here

Local Volunteer Application Form

Full name of applicant	
Date of birth	
Age	
Physical Residential Address	
Email Address	
Phone Numbers	

WORK EXPERIENCE:

Please list all work experience for at least the past 10 years, including place of employment, dates of employment, type work done, and reason for leaving, and a reference we can contact. *(Use additional paper if necessary):*

What experience do you have in working with children?

Church Life:

Where do you attend church and describe its basic foundation. (Not essential to be a Christian this is just for our information)

How did you find out about The Door of Hope Children's Ministry?

How did you know you wanted to be a volunteer?

Character:

Describe your character and personality given that we know nothing about you



Faith

Tel: +27 (0)11 432 2797
info@doorofhope.co.za

Hope

www.doorofhope.co.za
www.hopevillage.co.za

Love

8 Copelia Avenue, Glenvista
South Africa, 2091

Skills, Strengths, Weaknesses:

What skills have you already developed that will be helpful in the work at the Baby House?

What are your greatest strengths?

What are your greatest weaknesses?



Faith

Tel: +27 (0)11 432 2797
info@doorofhope.co.za



Hope

www.doorofhope.co.za
www.hopevillage.co.za



Love

8 Copelia Avenue, Glenvista
South Africa, 2091

Have you ever had a history of substance abuse? If so, tell us about it. Remember that this application is kept in strictest confidence. Your honesty counts.

By completing this form you agree to work an 8 hour shift, what days in the week would you be able to work your shift?

References:

Please list three references with email addresses (one can be your pastor) that will write letters of recommendation for you. We will contact them. None of your references should be related to you or live in the house with you.

1.

2.

3.

Please note a requirement of being approved is that you must be 20 years old, apply for a police clearance certificate – Also known as a criminal background check as well as the Form 30 sexual offender's clearance. You are responsible for getting this to us with your application. Approval cannot occur until this has been received. Please send all documents to info@doorofhope.co.za once completed.

