

VOLUNTEER APPLICATION FORM

Our Neighbours Ministry *Incorporating Isaiah's Homes of Love*

57 Jason Moyo Street, between 4th and 5th Ave
Bulawayo, Zimbabwe

P.O. Box 2361, Bulawayo

Tel: +263 9 64472/74 (Office)
+263 9 230504 (Babies Home)
+263 9 62664 (Hearts of Love)



Email: isaiahs@yoafrica.com or martinbarrow@hotmail.com

Website: www.ourneighbours.org

GENERAL INFORMATION

Please complete the following information by filling in the GREY boxes.

Name: _____

Address: _____

Tel no: _____

Email address: _____

Date of Birth: ____/____/____

Female Male

Marital Status: _____

BACKGROUND

Please attach your CV/resume. This should include schooling (grades attained) and employment history (and any volunteering work).

PERSONAL

Please complete all of the following questions as clearly, completely & concisely as possible.

1. **What are you doing at the moment?** (Employer, College (which yr), Church work, other)

2. **Are you a Christian? If so which church do you attend, are you comfortable working in an inter-denominational Christian Organisation and could we contact your pastor for a reference? (if so please provide contact details, ideally an email address).**

VOLUNTEER APPLICATION FORM

3. If you aren't a Christian, are you willing to work within an inter-denominational Christian Organisation?

4. Why do you want to be a volunteer for Our Neighbours and/or Isaiah's Umuzi Wothando?

5. What skills do you feel you could contribute to this team?

6. Do you speak any language other than English? If so, what language and what's your level?

7. Please describe your family background/history and current interactions with one another. (This will help us understand where & how you can fit into a ministry which serves children, youth & adults from various types of family backgrounds.)

8. Please describe your strengths.

9. Please describe your weaknesses.

FAITH JOURNEY/PERSONAL CONT'D

1. If you feel comfortable sharing, please describe your faith journey.*
(If a Christian, include when, how and in what circumstance you came to Christ. Include your current personal Bible study and prayer life and your involvement in your church.)

VOLUNTEER APPLICATION FORM

2. Please add anything else that you feel qualifies you to serve with us or would be a valuable asset to the ministry.

** Please recognize that your eligibility to volunteer with us will not be determined by your faith journey in-so-far as you, the volunteer, are comfortable working with an organization which is expressedly Christian and faith-based in its entirety.*

HEALTH

Please write YES or NO next to each of the following questions.

1. Do you normally enjoy good physical and mental health? _____
2. Are you currently suffering from any physical and/or mental illness? (If yes, give brief details below.) _____
3. Does any member of your family suffer from any hereditary disease? (If yes, give brief details below.) _____
4. Have you ever had any serious illness? (If yes, please give brief details below.) _____
5. How much health-related absence have you had from your employment/studies during the last five years? ____

If necessary, please provide any extra health-related information here:

ESSENTIAL SUPPORTING DOCUMENTS REQUIRED

1. Please provide a certified copy of your National Registration Document / Birth Certificate.
2. In line with our Child Protection Policy, you will be required to produce a valid/current Police Clearance.

REFERENCES

Provide the names of 3 referees who can be contacted for character references. For each, please give telephone numbers, email addresses, and relationship to you. Please ensure that 2 send Our Neighbours a copy of the reference sheet attached.

1. _____

2. _____

3. _____

SIGNATURE

Please sign and date.

SIGNED: _____

DATE: _____

VOLUNTEER APPLICATION FORM

Office Use Only:

Date application received _____; By whom: _____

References received dates _____, _____, _____.

Interview set for: _____, conducted by: _____

Decisions made: _____

Signature of responsible staff member: