|  |
| --- |
| **PERSONAL DETAILS** |
| **Name:** |  |
| **Contact Phone/s:** |  |
| **Address:** |  |
| **Email address:** |  |
| **Date of birth:****Occupation:****Languages spoken:** |  |

|  |
| --- |
| **PLANS / DETAILS** |
| **Which program do you want to volunteer with?** | 🞏 Community English Program🞏 Community Health Program |
| **Approximately which dates would you like to volunteer with TEWFI?** ***(two month minimum)*** |  |
| **Do you have any other travel planned before/after your volunteer placement?** |  |

|  |
| --- |
| **Why do you want to volunteer with TEWOAF?** |
|  |

|  |
| --- |
| **What skills, experience or qualifications do you have that are relevant to this position?** |
|  |

|  |
| --- |
| **What do you hope to achieve by volunteering in this program?** |
|  |

|  |
| --- |
| **What do you see as the positive and negative aspects of volunteering in this context?** |
|  |

|  |
| --- |
| **What experience do you have communicating in cross-cultural situations? What do you see as important?** |
|  |

|  |
| --- |
| **What problems do you foresee as a foreigner from a Western background in this working context?** |
|  |

|  |
| --- |
| **REFEREES: At least one professional and one personal** *(Include name, relationship to you, and contact details)* |
| **Referee 1:** |  |
| **Referee 2:** |  |
| **Referee 3:** |  |

|  |
| --- |
| **Is there anything else you would like to add in support of your application?** |
|  |

|  |
| --- |
| **EMERGENCY CONTACT DETAILS** |
| **Name:** |  |
| **Relationship to you:** |  |
| **Contact Phone/s:** |  |
| **Email address:** |  |