

Villa of Hope Children's Home
PO Box 1630 Eldorado Park 1813
28 Cavendish Road Olifantsvlei, Nancefield, Johannesburg
Tel +2711 342-6178 Fax +2711 945-2051
E-mail: villaofhope@mweb.co.za

VOLUNTEERS OF HOPE APPLICATION

Signed applications may be mailed, or scanned and emailed, or faxed to addresses above.

Personal & Family Information

Full Name: _____ Goes By: _____

Phone: Work _____ Home _____ Cell _____

Address: _____

City: _____ Prov: _____ Country: _____ Code: _____

Email: _____

Citizenship: _____ Birth Date: _____ (YYYY/MM/DD)

Single/Never Married Married Divorced Remarried Widowed Living w/Partner

Spouse's Name: _____

Spouse's Address: _____

City: _____ Prov: _____ Country: _____ Code: _____

Names and ages of children: _____

Ministry Interest

In what areas of need would you like to serve?

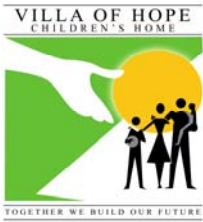
With Children: Bible Lessons Read to Children Assist with School Work Sports Crafts

On the Property: Maintenance/Odd Jobs in Homes Gardening/Lawn Maintenance Small-Scale Farming

Why do you want to serve with Volunteers of Hope? _____

Personal Faith Story

Are you a Christian? _____ If so, how did you become one? _____



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How would you describe your relationship with God at this time? _____

What spiritual gifts, abilities and skills do you feel God has given you? _____

How have you seen your gifts used by God? _____

Describe your personal spiritual disciplines:

*Prayer: _____

*Bible Study: _____

*Evangelism: _____

Church Involvement

Church Name: _____ Pastor: _____

Address: _____

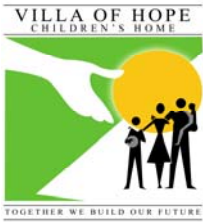
City: _____ Prov: _____ Country: _____ Code: _____

List churches you have attended regularly in the past 5 years including current church:

Year Left	Church Name	City/State/Prov	Phone	Reason for Leaving
N/A				Currently attending

How are you currently involved in ministry at your church? _____

What other ministry experiences have you had within your church or your community?



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Children's Ministry Experience

Where/when have you been involved in children's ministry or other activities involving children?

Start	End	Church/Organization	Supervisor	Phone	Your Position/Role

What aspects of Children's Ministry bring you the most joy? _____

What are your strengths in teaching kids and/or leading children's ministry? _____

What are your weaknesses or challenges? _____

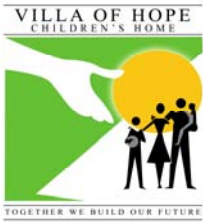
Education & Special Skills

What special skills do you bring to the Volunteers of Hope position you are applying for?

Languages Spoken/Proficiency: _____

List diplomas, degrees, certificates or specialized training you have received:

Year	School/Institution	Subject/Type of Training	Degree/Certificate



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Current Employment

Current Employer: _____

Position: _____ Responsibilities: _____

Required Screening Information

Have you ever participated in, been accused of, been charged with, plead no contest to, or been convicted of any of the following:

- ...child abuse, molestation or any crime or improper conduct involving a minor? No Yes
...any sort of illegal, immoral or inappropriate sexual activity? No Yes
...any other crime (other than minor traffic violations)? No Yes

Are you aware of any reason why you should not work with children or youth, including your own personal traits or tendencies? No Yes

Do you engage in the use of any form of pornography? No Yes

Do you misuse any form of alcohol, prescription drugs, hallucinogens, or other addictive substances? No Yes

Is there anything in your background or spiritual life (not already listed above) that might compromise the message of the gospel in any way or that the leadership of Villa of Hope should know about before making you a part of the Volunteers of Hope team? No Yes

If you answered "Yes" to any of the above questions, please attach an extra page and explain.

Affirmation of Accuracy & Authorization for Release of Information

I understand that Villa of Hope Children's Home is relying on the information contained in this application to ensure the safety and care of our children. Therefore, I attest and affirm that all of the information that I have provided Villa of Hope (in this and all other steps of the application process) is absolutely true and correct.

I authorize Villa of Hope Children's Home to contact any person or organization listed in this application, and I authorize any such person or organization to provide Villa of Hope with information, opinions, and impressions relating to my background, qualifications, character, or fitness for work with children or youth or in ministry leadership. I voluntarily release Villa of Hope and any of its agents and any such person or organization who provides this information from all liability involving the communication of such information relating to my background, qualifications, character, or fitness for work with children or youth or ministry leadership.

I waive any right that I may have to inspect references provided on my behalf. I further agree to allow personal information about me to be discussed as necessary between the Director, Pastors, Board of Directors, and key staff members or Volunteers of Villa of Hope Children's Home, and with any legal counsel obtained by Villa of Hope.

I agree to abide by all policies and procedures of Villa of Hope Children's Home and to submit to the authority of the Director, Pastors, and the Board of Directors. I further agree to refrain from unscriptural, immoral, or illegal conduct while I am considered a part of the ministry staff of Villa of Hope.

Signature of Applicant: _____ Date: _____