**TEWOAF Volunteer Application Form**

**Caring**

**Caring**

***please include additonal pages where needed to give more details***

**Please complete and return to** **volunteers@tewoaf.org.au**along with a current CV

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

|  |
| --- |
| **PLANS / DETAILS** |
| **Please nominate your preferred volunteer program** | 🞏 Community English Program🞏 Community Health Program |
| **Approximate dates you would 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 working in this 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:** |  |

**For information or assistance, please contact The East West Overseas Aid Foundation:**

**🡮 Phone: +61 3 9650 0514 🡮 Email:** **volunteers@tewoaf.org.au**