



## Jo'burg Child Welfare Local Volunteer Application Form

*Thank you for displaying a genuine interest in your community.  
We rely heavily on the support we receive from committed  
individuals who elect to actively champion our worthy cause*

Date Submitted: \_\_\_\_\_

**Please complete and email to [inkind@jhbchildwelfare.org.za](mailto:inkind@jhbchildwelfare.org.za), fax to 011 298 8591  
or return to Edura House, 1<sup>st</sup> Floor, 41 Fox Street, Marshalltown, 2107**

**Please attach a copy of your ID and police clearance**

### Personal Details

Surname	
Given Name	
Physical Address	
Postal Address	
Telephone (H)	
Telephone (W)	
Telephone (M)	
E-mail Address	
Date of Birth	
Gender	
Current Occupation	
Emergency Contact Details	

## VOLUNTEERING

Which volunteering position are you looking for (tick as many as apply):

### Child Care

*Help feed babies, assist older children with homework, do arts and crafts, help with cooking, etc.*

Any day or time within business hours, or as scheduled with organisation.

You will be contacted at the start of the new month with details regarding your placement at one of Jo'burg Child Welfare's centres or at one of the 55 community based organisations participating in Jo'burg Child Welfare's Orphaned and Vulnerable Children's (OVC) Forum.

*Office Use Only:* Placed at \_\_\_\_\_

### In Kind Donations

*Sort in-kind donations to ensure urgently needed items get to the various appropriate centres.*

Jo'burg Child Welfare

1<sup>st</sup> Floor, Edura House, 41 Fox Street, Marshalltown

Once-a-week commitment required (M-F)

### Flexible

*Help Jo'burg Child Welfare on an as-needed basis.*

JCW will contact you with specific requests for help at various centres or for various projects and events. You may accept or decline any particular request.

### Specialized

*Help Jo'burg Child Welfare by volunteering your area of expertise, for example, assistance with graphic design work, photography, financial guidance, etc.*

Your area of expertise: \_\_\_\_\_

To volunteer at Princess Alice Adoption Home, please email [princess\\_alice@mweb.co.za](mailto:princess_alice@mweb.co.za).

Why do you want to volunteer?

Are you involved in community work at the moment? If so, please give details.

How would you describe yourself?

What are your strengths?

What are your weaknesses?

What would you most like to assist with as a volunteer?

What would you least like to assist with as a volunteer?

Are you or any of your children adopted?

- 1. No
- 2. Self
- 3. Daughter
- 4. Son

Do you intend to adopt a child in the future?

- 1. No
- 2. Yes
- 3. Not Sure

Are you prepared to volunteer consistently (weekly or monthly) for a substantial period of time (3 months-1 year)?

Are you prepared to travel into Johannesburg City Centre, Soweto or Eldorado Park?

Are you able to attend a mid week interview?

Please indicate days and times you are able to volunteer:

- Mon: Tue:
- Wed: Thur:
- Fri: Sat:
- Sun:

Are there any specific times that you would not be available to volunteer?

**In being highly committed to protecting our clients, volunteers and staff, we only accept volunteers after a screening procedure. Please could you supply the names of two Referees that we would be able to make contact with.**

**Referee 1**

**Referee 2**

Name:

Name:

Relationship to you:

Relationship to you:

Tel:

Tel:

Email Address:

Email Address:

Have you ever in the past been convicted or are currently under investigation for any criminal offence? If yes, please explain.

Please detail any other information that you feel we should know:

I \_\_\_\_\_ confirm that the above information is true and correct. If I am accepted as a Volunteer of Jo'burg Child Welfare, I agree to adhere to all policies and procedures set out by the organisation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## INDEMNITY FORM

I, \_\_\_\_\_, (FULL NAME) \_\_\_\_\_ (IDENTITY NUMBER), hereby accept that I will undertake all responsible precautions to ensure the safety and welfare of myself and my possessions. I undertake not to put myself or any other volunteer, member of staff, or child living at Othandweni or within the community, at any risk whatsoever. I \_\_\_\_\_ (FULL NAME), the undersigned in my capacity as 'Local Volunteer' indemnify Jo'burg Child Welfare, including all its facilities, services, officers, servants, agents and representatives from any lawsuit or legal action for compensation of damages resulting from or caused by any injury or accident or loss or damage in property. This indemnity extends to any claim, judgments or other liability or expense (including, but without limitation, reasonably attorney's fees). I hereby irrevocably indemnify Jo'burg Child Welfare, whose indemnity shall be binding on me, as well as my heirs, executives, trustees, assigns or administrators, the extent of which I acknowledge and understand.

I \_\_\_\_\_ (FULL NAME) am aware of the following:

- The high level of crime in South Africa.
- The prevalence of HIV / AIDS in South Africa.

I \_\_\_\_\_ (FULL NAME), resident in \_\_\_\_\_ (AREA),

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (ADDRESS) hereby acknowledge and adhere to this indemnity.

\_\_\_\_\_  
VOLUNTEER

NAME: \_\_\_\_\_

\_\_\_\_\_  
(WITNESS)

NAME: \_\_\_\_\_



## OATH OF CONFIDENTIALITY

The volunteer undertakes and agrees that:

1. Under no circumstances will a volunteer disclose, outside of Jo'burg Child Welfare, the identity of a child of Jo'burg Child Welfare or any information about that child.
2. In dealings with the public, the volunteer will apply discretion on sharing material or information pertaining to Jo'burg Child Welfare in order that the name and/or function of Jo'burg Child Welfare will in no way be detrimentally affected.
3. Should I leave the collective, I agree to adhere to this oath of confidentiality even after my termination from 'Jo'burg Child Welfare.

\_\_\_\_\_  
Name of Volunteer

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date