



# CAPE TOWN CHILD WELFARE

|                                   |
|-----------------------------------|
| <b>Volunteer Application Form</b> |
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**Name** .....

**Surname** .....

**Address**

.....  
.....  
.....  
.....  
.....

**Tel: (home)** .....

**(work)** .....

**(cell)** .....

**If not own, neighbour name and number**

.....

**Age category: (18-25) (26-35) (36-45) (46- 55) (55+)**

**Occupation:** .....

**Home Language:** .....

**Other languages:** .....

.....  
.....

**Do you have children? (YES) (NO)**

**How many?** .....

**Ages:** .....

**Why do you want to volunteer for us?**

.....  
.....  
.....

**What skills do you have? Please give detail**

.....  
.....  
.....

**Do you prefer to assist with:**

- Adults ( )
- Children ( )

**What hours are you available?**

- Monday ( )
- Tuesday ( )
- Wednesday ( )
- Thursday ( )
- Friday ( )
- Saturday ( )
- Sunday ( )

- Morning ( )
- Afternoon ( )
- Evening ( )

**Is there any particular task you would like to volunteer for?**

**ECP VOLUNTEER: ( ) \***

\*You need to reside in the community where you will work as an ECP Volunteer

**ASSIST WITH HOLIDAY PROGRAMMES: ( )**

**ADMINISTRATION: ( )**

**CALL CENTRE VOLUNTEER: ( ) \*\***

\*\*Centre is situated in Hanover Park and volunteer work is after hours

**EMERGENCY MOTHER:** ( ) \*\*\*

\*\*\* Take in children on short term when removed from care givers

**FOSTER MOTHER:** ( )

**THERAPEUTIC WORK WITH CHILDREN:** ( )

**ASSIST AT EDU CARE CENTRES:** ( ) \*\*\*\*

\*\*\*\*Only situated in Guguletu, Khayelitsha, Lotus River, Ottery and Hout Bay

**SKILLS TRAINING:** ( ) Please specify .....

**Other:** ( ) Please specify:

.....  
.....  
.....

**Which area would you prefer to work in?**

GUGULETU: ( )

MANENBERG: ( )

ATHLONE: ( )

HANOVER PARK: ( )

HEIDEVELD: ( )

LOTUS RIVER/OTTERY: ( )

PHILIPPI: ( )

PHUMLANI VILLAGE: ( )

KHAYELITSHA: ( )

LANGA: ( )

HOUT BAY: ( )

DU NOON: ( )

**Were you involved in any other voluntary/ community activities?**

(YES) (NO)

If YES, please give detail of your involvement:

.....  
.....

**Are you doing volunteer work at the moment?**

(YES) (NO)

**Do you have a criminal record? (YES) (NO)**

If yes, specify .....

.....

.....

**Have you ever been convicted or accused of any form of child abuse or neglect? (YES) (NO)**

If yes, specify .....

.....

**Do you have any mental or physical problems/ illness that may affect your duties as a volunteer? (YES) (NO)**

If yes, specify .....

.....

NAME: ..... DATE: .....