

# **Catholic Volunteers Overseas Application Form**

#### **INSTRUCTIONS**

Please complete this form if you wish to be considered for a volunteer assignment or project, or to be registered on the database of prospective volunteers.

You may print the form and complete it in your own handwriting, returning it by post, or you may complete it electronically and send it by email. An electronic version is preferred.

Please answer all questions or enter N/A if not applicable.

You must also supply a Curriculum Vitae summarising work history, qualifications and experience.

# Age, Family Status, and Religion

Assignment/Project

This information will only be considered where it is relevant to the assignment offered.

### **Catholic Volunteers Overseas Privacy Statement**

The information you provide in this form is covered by the Privacy Act 1993, and will only be used for Catholic Volunteers Overseas recruitment and selection purposes. All information provided will be kept secure.

Are you applyin	g for an adver	tised assignment?	1	YES / NO	
If YES, please s	tate the assigr	nment title and co	untry:		
Volunteer data	abase				
Are you applyin YES / NO	g to register y	our interest in bei	ng placed on	our Volunteer Databas	se?
What is your pr	imary occupat	ion/profession?			
Full Name					
	First Names		S	Gurname	
Present Addre	ss				
Email Address					
Eman Address					
Telephone					
	Private	Business	Fax	Mobile	



Date of Birth	Place of Birth	Male / Female
Residency Status NZ	Citizen / NZ Resident / Oth	er
If Other, please describe your res	idency status:	
Passport		
Number	Country Place of Issu	ue Expiry Date
FAMILY		
Marital Status Are you Single /	Partnered / Marr	ied / Widowed
Name of spouse/partner:		
Do they intend to accompany y	ou on assignment? YES / NO	
Children		
Do you have children? YES	/ NO	
If so, please list names, ages, and	l if they are dependent or not	
ii so, piease list lialiles, ages, alic	in they are dependent of not.	
Other Dependents  Do you have elderly parents /disa	bled family members who are depen	ident upon your
support? YES / NO	,	, ,
If Yes, please explain.		
Next of Kin (other than partner/s	spouse through whom you may be co	ontacted)
Name	Relationship	
	Kelationship	
Address	Phone	
	Email	



Religious	<b>Affiliation</b>
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Are you Catholic?

YES / NO

If YES, what Parish / Worshipping Community do you belong to?

If NO, do you have a religious affiliation with any other faith or community? (please specify)

## EDUCATION

EDUCATION		
Please list all your qualification	ns (listing most recent first):	
Qualification Title	Name of Institution	Date awarded
Quamicanion in the		2 4 5 4 11 4 1 4 4
If possible, please attach copie	s of certificates	
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### **WORK EXPERIENCE**

Please give details of your work experience, listing present or most recent first (attach a

separate sheet, if preferred). **Present or most recent employment: Job Title** Name of type organisation / business/ institution? Address of above **Dates employed** May we contact this employer for a reference? YES / NO



Name of person to be contacted:
Description of work, including main duties and responsibilities
Notice required:
Are you available for <b>short term</b> (less than 3 months) or <b>long term</b> (up to 2 years)?
Previous Post:
Job Title
Name of type organisation / business/ institution?
Address of above
Dates employed
May we contact this employer for a reference? YES / NO
Name of person to be contacted:
Description of work, including main duties and responsibilities
Additional Skills List any other skills you have e.g. computer skills, accounting, first aid, sewing, farming,
gardening, building, concreting, youth work, community work, sports coaching, child care etc.
Cic.



Do you hold a current drivers licence? YES / NO	
Do you hold a current motorcycle licence? YES / NO	
Travel and Cross-Cultural Experience Have you lived or worked or travelled in any countries outside of New Zealand? Please give details of where, how long for, and purpose of travel.	
Have you worked with people of cultures other than your own? Please give details.	
Interests	
Interests Are you, or have you been a member of any organisation, committee, society etc.?	
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Are you, or have you been a member of any organisation, committee, society etc.?  Name of the organisation:  Involvement:	
Are you, or have you been a member of any organisation, committee, society etc.?  Name of the organisation:  Involvement:	
Are you, or have you been a member of any organisation, committee, society etc.?  Name of the organisation:  Involvement:  What sports do you, or have you played? Describe level of proficiency.	
Are you, or have you been a member of any organisation, committee, society etc.?  Name of the organisation:  Involvement:	
Are you, or have you been a member of any organisation, committee, society etc.?  Name of the organisation:  Involvement:  What sports do you, or have you played? Describe level of proficiency.	



## **HEALTH**

Catholic Volunteers Overseas requires applicants to have a medical examination before their assignment is confirmed.

General Health status
How would you describe your personal health status?
Excellent / Well / Stable
Pre-existing conditions
Please specific any past or present serious/recurring illness, major surgery, or disability, and give brief details (e.g. allergies, heart, respiratory ailments, back problems,
diabetes, epilepsy, psychiatric of psychological problems etc).
diabetes, epilepsy, psychiatric or psychological problems etc).
Are you using a treatment to successfully manage a physical condition? If so, explain
briefly.
Alcohol / Drugs
Have you ever received treatment for a significant dependence on alcohol or drugs? If
so, explain briefly.
So, explain briefly.
PERSONAL STATEMENTS
Why do you want to volunteer your skills through Catholic Volunteers Overseas? What is
your personal motivation?
Write a candid description of yourself as a person, describing what you consider your



main strengths and weaknesses.
Is there anything else you think could be of relevance to this application? Please
elaborate.
Convictions
Please note that all successful applicants will be required to have New Zealand Police
Clearance at Caritas Aotearoa New Zealand expense prior to placement.
Do you have any criminal convictions, or are you awaiting sentencing? YES / NO
If YES, please give details.
DEFENENCE
REFERENCES Professional Reference
Please provide full contact details of TWO people who can comment on your work
experience relevant to the project, e.g. your specific skills, specific expertise, time- management and initiative.
management and midative.
1: Name:
Address:
Address:
Telephone: Mobile:
receptioner
Why have you nominated this person as a referee?
Tiny have you nonlinated this person as a referee:
2: Name:
Address:
Telephone: Mobile:
Telephone: Mobile:



#### **Character Reference**

Please provide full contact details of a person who can comment on your personal qualities, integrity, lifestyle and your contribution to and involvement in community initiatives.

Name:

**Contact details:** 

Why have you nominated this person as a referee?

Signature Date

Please return this completed form to Catharina Vossen, Catholic Volunteers Overseas Coordinator, by one of the following means:

**Email**: <u>volunteers@caritas.org.nz</u>

Fax: (04) 499 2519

Mail: PO Box 12193, Thorndon, Wellington 6144