

**Application sheet
for long-term voluntary services abroad for project registration**

Name of institution: _____

Country: _____

Contact person: _____

Address: _____

Telephone: _____

Fax: _____

E-Mail: _____

Internet: _____

Director of the institution:

Name: _____

Telephone: _____

Fax: _____

E-Mail: _____

Mentor of the volunteer (please, not the direct principal):

Name: _____

Function of the Mentor inside of the institution: _____

Address: _____

Telephone: _____

Fax: _____

E-Mail: _____

Which experience does the Mentor have?

Type of institution (Please mark):

- | | |
|--|--|
| <input type="checkbox"/> Curative Education | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Social therapy | <input type="checkbox"/> Ecology |
| <input type="checkbox"/> School | <input type="checkbox"/> Social work |
| <input type="checkbox"/> Kindergarten | <input type="checkbox"/> Assistance to the elderly |
| <input type="checkbox"/> Development cooperation | <input type="checkbox"/> C's home |
| <input type="checkbox"/> Social youth work | <input type="checkbox"/> Others: |
| <input type="checkbox"/> Medicine | _____ |

I. Information concerning the institution

1.1 Please give a short description of your institution:

1.2 Which fields of work do you have in the institution? (e.g. workshop, bakery etc.)

1.3 Please describe any further aspect, which should be included in the description of your institution:

1.4 Size of institution:

Number of **regional** full-time staff members:

Number of **honorary** staff members:

Number of residents / children etc.:

Intended number of foreign volunteers the institution can host per year all in all:

Maximum number of volunteers per year from the "Freunde":

We need...

- only male volunteers
 only female volunteers
 both male and female volunteers

1.5 Which is the target group of your institution?

Please describe briefly the social circumstances/conditions?

1.6 How many beneficiaries (e.g. students who are exempt from paying school fees) do you have in your institution? Please name the number or percentage of the beneficiaries:

1.7 Are you planning to increase the number of beneficiaries?

- Yes No, why not? _____

1.8 Does your institution pursue projects relevant to development help (e.g. social projects to fight poverty)?

- Yes No

If no, do you plan such projects?

- Yes No

If yes, have you defined concrete steps to start the projects?

- Yes No

If yes, which ones? (Please explain briefly and concisely)

1.9 Does your Institution have an anthroposophical/waldorf pedagogical background?

Yes No

1.10 Is your Institution a non-profit organization?

Yes No

II. Information concerning the work of the co-workers

2.1 Detailed description of the work the volunteers will perform (please specify in note-form.
Please describe the daily routine of the co-workers, as well as special working conditions,
if necessary.

2.2 Are there special working hours? (e.g. community life, shift work etc.)

No Yes, the following:

III. Information concerning pocket money, board and accommodation

Please note: If board and accommodation cannot be offered, a placement of volunteers might be difficult.

3.1 Can accommodation be offered?

Yes No, because: only partial, because:

3.2 Type of accommodation

3.3 Can board be offered?

Yes No, because: only partial, because:

3.4 Are there special conditions concerning nutrition?

No Yes, the following:

3.5 Can the institution pay pocket money to the co-workers?

- Yes, to an amount of: _____ € / month.
 No, we cannot pay any pocket money.

IV. Information concerning the educational support and free-time facilities

4.1 How will the co-worker be introduced and trained for his work? (e.g. personal guidance)

4.2 What possibilities of further training opportunities are provided in the institution?

4.3 What free-time facilities are there for the volunteers inside and outside the institution?

Inside:

Outside:

V. Information concerning the application

5.1 Special requirements/expectations the volunteers have to meet

5.2 What criteria of selection are there for the co-workers? (Please do mark ONLY if applies!)

- Minimum age: _____ years. Reason: _____
- The social service should be at least for a period of _____ months time.
- Language knowledge (please list):

- Driving licence
- Musical or handcraft skills (please list):

- Other skills:

5.3 The application is coming through our Online-Portal, consisting of a CV, a motivation letter and a photo. What languages are required in the application of the co-workers?

Languages of application: _____

School record, Certifications of internships, Certifications of work experience and other documents can be requested separately.

5.4 Are there restrictions or problems concerning visa assignments?

No Yes, the following:

Are you willing to pay a contribution to cover the costs of the work provided by Freunde (estimated 1000€)?

- Yes
 Only to an amount of _____ €,
because: _____ .
 We would like to be exempted,
because: _____ .

Questions / remarks (Please note here if you have further questions or if you need additional information):

Please beware: When applying as a new institution:

Please additionally attach the following information to your application:

- Certification of non-profit status
- Brochure

Please return the completed questionnaire via E-Mail, fax or by mail.

Thank you very much for the information!