Application Process

Thank you for your interest in becoming a Hands at Work volunteer for a year.

All questions on the application form must be completed by the applicant. If you have any difficulties in answering a question, please don’t hesitate to contact your International Office for assistance.

The purpose of this application is for us to get to know you better and to make sure that you are a good fit for the team.

Once we have received your application and accompanying documents, we will contact you to let you know that your application has been received. During this process, we may contact your referees directly. We may contact you via email or phone to ask any questions that we may have. After the closing date we will contact you via your International Office to inform you whether your application to be part of the team has been successful or not.

**In your application, please include**:

1. The Application Form
2. Your Testimony
3. Résumé outlining work history, qualifications, certificates, etc.
4. Your Confidential Medical Advice Form;
5. An enhanced police disclosure (for working with children) valid within the last three months
6. Photocopy of your passport
7. A recent passport sized photo of yourself

The three reference forms from your pastor, employer and friend are to be sent independently to your International Office.

Thanks again, your international office looks forward to receiving your application shortly

Australia  
[info@au.handsatwork.org](mailto:info@au.handsatwork.org)

Canada  
[volunteer@ca.handsatwork.org](mailto:volunteer@ca.handsatwork.org)

United Kingdom  
[info@uk.handsatwork.org](mailto:info@uk.handsatwork.org)

United States  
[volunteer@us.handsatwork.org](mailto:volunteer@us.handsatwork.org)

**Hands at Work Volunteer Application**

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| **Personal Details** | | | | | | | | | | | | | | | | | | |
| Name: (First and middle) | | | | | | | | | | | | (Surname/last name) | | | | | | |
| Sex:  M  F | | Passport No: | | | | | | | | | | | | ID Card No: | | | | |
| Date of Birth: Day Month Year | | | | | | | | | | | | Country of Birth: | | | | | | |
| Nationality: | | | | | | Do you hold dual nationality?  Yes  No | | | | | | | | | | | | |
| If yes, what countries: | | | | | | | | | | | | | | | | | | |
| Country of Residence: | | | | | | | | | | | | Passport Nationality: | | | | | | |
| Do you have your Drivers Licence?  Yes  No Type: | | | | | | | | | | | | | | | | | | |
| Marital Status: |  Single | | |  Married |  Widowed | | | | | |  Divorced | | | |  Separated | | Co-habiting | |
| ***\*****If married and travelling with spouse, spouse must fill out separate application* | | | | | | | | | | | | | | | | | | |
| Your profession: | | | | | | | | | | | | | | | | | | |
| Permanent Address: | | | | | | | | | | **Phone (incl. country code)**  Home:  Cell:  Fax:  Email: | | | | | | | | |
| When are you applying for:  September  February Year: | | | | | | | | | | | | | | | | | | |
| **Family Details** | | | | | | | | | | | | | | | | | | |
| If Married, give name of Spouse: | | | | | | | | | | | | | | | | | | |
| Names of Children who will be accompanying you: | | | | | | | | | Sex | | | | Date of Birth | | | | | |
|  | | | | | | | | |  | | | |  | | | | | |
| Next of Kin: *Give name, address, e-mail and telephone number of two relatives who can be contacted in case of emergency.* | | | | | | | | | | | | | | | | | | |
| 1. | | | | | | | | 2. | | | | | | | | | | |
| **Education Details** | | | | | | | | | | | | | | | | | | |
| List your qualifications: | | | | | | | | | | | | | | | | | | |
| **Current Employment Details** (please also include a copy of your resume) | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| English Speaking Ability:  Excellent  Good  Fair  Poor  English Reading / Comprehension Ability:  Excellent  Good  Fair  Poor  Other Languages Spoken:  Other Languages Read: | | | | | | | | | | | | | | | | | | |
| **Overseas Experience** | | | | | | | | | | | | | | | | | | |
| Which countries have you visited, when, and for what purpose? (Include any missions exposure or other Christian work and any travel for school or vacation purposes): | | | | | | | | | | | | | | | | | | |
| **Church Affiliation** | | | | | | | | | | | | | | | | | |
| *Are you a member of a church?  Yes  No If yes how long?.* | | | | | | | | | | | | | | | | | |
| Pastor’s Name:  Church Name:  Pastor’s address, phone number and e-mail:  Are you involved in a small group or bible study?  Yes  No if yes how long?  Do you currently volunteer at your church or in your community  Yes  No If yes what programs or departments and for how long? | | | | | | | | | | | | | | | | | |
| Church Attended | | | Denomination | | | | Period | | | | | | | | | Involvement | |
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| **Christian Commitment** | | | | | | | | | | | | | | | | | |
| Hands at Work is a Christian organization, and in order to serve longer term there is a faith commitment required, as well as a willingness to respect Christian ways and lifestyle and to participate in Christian devotions and prayer times. Hands at Work embraces people of all Christian denominations.  In an effort to learn more about you, it is helpful to learn about your faith journey and how you came to want to become a Hands at Work Volunteer  **Please give your testimony below (continue on a separate sheet if necessary)** | | | | | | | | | | | | | | | | | |
| **Write about any significant events in your life that have impacted you spiritually, physically or emotionally**  **How would you describe your current spiritual life?**  **Please share any special concerns, events or issues in your life that may impact your commitment or involvement as a Hands at Work Volunteer** | | | | | | | | | | | | | | | | | |
| **Skills, Gifts and Abilities -** Please indicate below what you consider to be your gifting. | | | | | | | | | | | | | | | | | |
| Teaching Giver Knowledge Mercy  Leadership Hospitality Faith Intercession/ prayer  Server Evangelism Interpreter Healing  Encourgaer Helps Discernment Pastoring  Missions Music Prophecy | | | | | | | | | | | | | | | | | |
| **Why are you applying to Hands at Work?** | | | | | | | | | | | | | | | | | | |
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| **How did you hear about Hands at Work?** | | | | | | | | | | | | | | | | | | |
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| **What do you foresee your involvement in Hands at Work to be?** | | | | | | | | | | | | | | | | | | |
| *i.e., area of ministry / function, etc.* | | | | | | | | | | | | | | | | | | |
| *If asked would you be willing to serve in a role utilising your previous work experience and skills? Why or why not?* | | | | | | | | | | | | | | | | | | |
| **Team Work** | | | | | | | | | | | | | | | | | | |
| *Hands at Work is a family made up of many different cultures, ages and backgrounds and you may encounter stressful, difficult situations together. Tell us how you would approach this*  *Tell us how you cope in stressful situations*  *Has it ever been a challenge to you to submit yourself to leadership, male or female*  Yes  No  *If yes please explain.......*  *When things don’t go ‘as planned or scheduled’ how do you handle it? Please explain......* | | | | | | | | | | | | | | | | | | |
| **Criminal convictions** | | | | | | | | | | | | | | | | | | |
| *Because you will be working with children and vulnerable people you must answer the following question: Have you ever been charged with a sexual offense, offense relating to children or a crime of violence*  Yes  No  *If yes, please give explain (use additional page if needed):* | | | | | | | | | | | | | | | | | | |
| *Are there any issues from your past that you think you should, or would like to verbally communicate in confidence to leadership?* Yes  No *If yes, please explain below* | | | | | | | | | | | | | | | | | | |
| **References** | | | | | | | | | | | | | | | | | | |
| *Give the name, email address and street address of three persons who have known you for two years or more. Please include the following references with your application: one personal, one pastoral/church and one from your last or current employer.*  *Please have your references send their reference to us separately, we may also contact them for further information* | | | | | | | | | | | | | | | | | | |
| 1) | | | | | | | | | | | | | | | | | | |
| 2) | | | | | | | | | | | | | | | | | | |
| 3) | | | | | | | | | | | | | | | | | | |
| *To be signed by the applicant:*  *I declare all information disclosed in this application form to be true and correct. I have not withheld any relevant information. I authorize the investigation of the information contained in this application.*  *Signed by applicant: Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | | | | | | | | | | | | | | | | | | |

CHECK LIST

* This application form
* Resume outlining work history, qualifications, relevant volunteer experience, skills and interests etc
* Your confidential medical advice form
* A copy of your enhanced police disclosure valid within the last three months
* Photocopy of your passport
* A recent passport sized photo of yourself
* NB reference letters to be sent separately by your referee