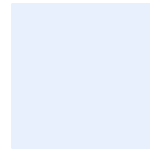




ADRA Germany e.V. - ADRAlive!

Development volunteer service weltwärts
Robert-Bosch-Str. 10
64331 Weiterstadt



Insert current application photo

Educational support team:

Nadja Kaun: 06151-8115704
Florian Diegmann: 06151-8115709
E-mail: live@adra.de
Web: live.adra.de

Application form for the weltwärts development volunteer service

Please send the application form (with data protection and consent declarations attached) as well as the other application documents to us (live@adra.de) in **one** PDF file if possible.

About the person

Family name Click or tap here to enter text.	First name(s) <i>(all first names as listed in the passport)</i> Click or tap here to enter text.	Date of birth Click or tap here to enter text.	Place of birth Click or tap here to enter text.
Marital status <input type="checkbox"/> single <input type="checkbox"/> married	Nationality <input type="checkbox"/> Tanzania <input type="checkbox"/> Mozambique <input type="checkbox"/> other nationality (which one?): <input type="text"/> <input type="text"/>		

Contact details

Street, house no. Click or tap here to enter text.	Postcode, city Click or tap here to enter text.	Federal state Click or tap here to enter text.
Telephone Click or tap here to enter text.	Mobile phone Click or tap here to enter text.	e-mail Click or tap here to enter text.



Application situation

Have you also applied for voluntary service with another organisation?

No Yes If yes, where: Click or tap here to enter text.

Have you already performed one of the following services?

weltwärts Voluntary social/ecological year Culture-wide
 other: Click or tap here to enter text.

No

Yes, from (month/year) to (month/year)

Kommentiert [NL1]: IJFD kann raus

Health

Are there any allergies or previous illnesses (including mental illnesses) relevant to the assignment abroad?
(This information is voluntary and serves to enable better monitoring/better framework conditions)

No
 Yes, the following: Click or tap here to enter text.

Education and vocational training at the time of departure

Secondary school leaving certificate Completed vocational training, subject: Click or tap here to enter text.

Other school leaving certificate Completed Bachelor's degree, subject: Click or tap here to enter text.

A-levels Completed Master's degree programme, subject: Click or tap here to enter text.

Last completion date/expected completion date: Click or tap here to enter text.

Current activity



<input type="checkbox"/> Pupil	<input type="checkbox"/> Self-employed as: Click or tap here to enter text.
<input type="checkbox"/> Trainee, profession: Click or tap here to enter text.	<input type="checkbox"/> job seeker
<input type="checkbox"/> Student, degree programme: Click or tap here to enter text.	<input type="checkbox"/> Volunteer service provider: Click or tap here to enter text. (Activity/Organisation)
<input type="checkbox"/> Employee: Click or tap here to enter text.	<input type="checkbox"/> other: Click or tap here to enter text.

Language skills

<p>Language(s) incl. information on level (written and oral)</p> <p>Click or tap here to enter text.</p>

Computer skills

<input type="checkbox"/> Word processing	<input type="checkbox"/> Spreadsheet calculation	<input type="checkbox"/> Graphic programmes	<input type="checkbox"/> Databases	<input type="checkbox"/> Homepage creation
<input type="checkbox"/> Image processing	<input type="checkbox"/> Film editing	<input type="checkbox"/> More: Click or tap here to enter text.		

Voluntary work, professional experience, internships, stays abroad of more than 4 weeks:

Please enclose evidence of the above activities (if available).

Activity/commitment	Organisation	Place or country	From (month/year)	Until (month/year)

Countries of operation



ADRAlive! voluntary service is currently possible in the Deployment sites listed below. Please tick the Deployment sites in which you would like to volunteer. Multiple answers are possible and welcome. **(We ask for your understanding that we cannot guarantee the favoured Deployment sites 100%).**

<input type="checkbox"/>	Please briefly explain why you can imagine working in this Deployment site: Click or tap here to enter text.
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Work areas

We offer various areas of work as part of our volunteer programme. Please select at least two areas.

<input type="checkbox"/> Care of children/young people	
<input type="checkbox"/> Organic farming	
<input type="checkbox"/> Craft	
<input type="checkbox"/> Nature conservation /environmental protection	<input type="checkbox"/> Education
<input type="checkbox"/> Social work	<input type="checkbox"/> Other: <input type="text"/>

How did you find out about weltwärts and ADRAlive?

Click or tap here to enter text.

Signature

I confirm the accuracy and completeness of the above information

<input type="text"/>	<input type="text"/>
Place, date	Signature

Privacy policy

ADRA Deutschland e.V. is applying for state funding from the BMZ's "weltwärts" programme. To participate in the development volunteer service, you must therefore agree to the following data protection provisions:

I agree that the personal data provided by me to ADRA Deutschland e.V., which are necessary for the processing of the contractual relationship (name, address, e-mail address, telephone number, date of birth, religious denomination, nationality), will be stored for as long as is necessary for the implementation of the project and for statistical purposes. Furthermore, I agree that this data may be passed on to the bodies



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required for the implementation of the programme (BMZ, insurance companies, travel agencies, embassies, migration authorities, partner organisations, sponsors, seminar leaders and speakers at the seminars and the other volunteers in the relevant year of assignment).

The data will be used for my safety in the host country, for reporting to various federal offices and, if necessary, for invitations to events as part of the weltwärts programme.

The data will not be passed on or sold to third parties. Access to the data is reserved for ADRA Deutschland e.V. employees.

Furthermore, I am aware that I have the right to request information at the following address: ADRA Deutschland e.V., ADRAlive!, Robert-Bosch-Str. 10, 64331 Weiterstadt, Germany, to request information about which of my data is stored.

Yes, I agree to the privacy policy.

Place, date

Signature (digital signature possible)



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Declaration of consent to the forwarding of application documents

I, , born on , hereby give my consent to ADRA Deutschland e.V. to forward my application documents to the ADRA Deutschland association to the partner organisation assigned to me as part of the selection procedure. Furthermore, I am aware that I have the right to revoke my consent at any time with effect for the future. The revocation must be submitted to ADRA Deutschland e.V. in writing. I am aware that the partner organisation assigned to me by ADRA Deutschland e.V. has been informed of its obligation to maintain data confidentiality and has signed a confidentiality agreement.

Place, date

Signature (digital signature possible)

Emergency contact form

To be notified in an emergency during the volunteer service:

Family name	First name	What is your relationship with the volunteer?
<input type="text"/>	<input type="text"/>	<input type="text"/>
Street, house no.	POSTCODE	Location
<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone	Mobile phone	email
<input type="text"/>	<input type="text"/>	<input type="text"/>

Declaration of consent for informing an emergency contact

I, , (first name, surname volunteer), hereby declare that I agree that my specified emergency contact (see below) may be contacted and informed by ADRA Germany e.V. in crisis situations. Which information is passed on and at what time is at the discretion of ADRA Deutschland e.V.

I agree that ADRA Deutschland e.V. may contact my emergency contact in the event of an emergency.

Place, date

Signature (digital signature possible)



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Declaration of consent from the emergency contact

I, , hereby give my consent for my personal data (name, address, telephone number, e-mail) to be entered in the ADRAlive! application form as an emergency contact by the applicant.

I agree that ADRA Germany e.V. may contact me in the event of an emergency.

Place, date

Signature (digital signature possible)

