





ADRA Germany e.V. - ADRAlive!

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



Insert current application

Educational support team:

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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		First name(s) (all first names as listed in the passport)	Date of birth	Place of birth
Click or tap here to text.	enter	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Marital status	Tarital status Nationality			
□ single	☐ Tanzania			
☐ married	☐ Mozambique ☐ other nationality (which one?):			

Contact details

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







Kommentiert [NL1]: IJFD kann raus

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 s	ervices?	
□ weltwärts □ Voluntary social/ecological year □ Culture-wide □ other: Click or tap here to enter text.			
□ No			
☐ Yes, from	month/year) to	(month/year)	
Health Are there any allergies or pro	evious illnesses (inclu	ding mental illnesses) relevant to the assignment abroad?	
		er monitoring/better framework conditions)	
☐ No ☐ Yes, the following: Click or tap here to enter text.			
Education and vocational	training at the tin	ne 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			
□ Pupil		☐ Self-employed as: Click or tap here to enter text.	
☐ Trainee , profession : Click or tap here to enter text.		□ job seeker	







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☐ Employee: Click or tap here to enter text.			other: Click or tap here to enter text.		
anguage skills					
.anguage(s) ncl. information on le	vel (written and oral)				
Click or tap here to e	nter text.				
omputer skills					
□ Word processing	□ Spreadsheet calculation	☐ Graphic programmes	□ Datab	oases \Box	Homepage creation
☐ Image processing	☐ Film editing	☐ More: Click	or tap here to en	ter text.	
f more than 4 we	of the above activities (if a		ountry Fi	oad rom nonth/year)	Until (month/year)
hich you would like to	ation vice is currently possible in volunteer. Multiple answe favoured Deployment si	rs are possible a			
	Please briefly expla	in why you can i	nagina wanking in t	his Donlovma	
	Click or tap here t		nagine working in t	ins Deployme	ent site:

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V	veltwärts 🖔	11.00.	
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_			
Work areas			
Ve offer various areas of work as part of our volu	nteer programme. Please select	at least two areas.	
☐ Care of children/young people			
\square Organic farming			
☐ Craft			
\square Nature conservation /environmental	☐ Education		
protection			_
☐ Social work	□ Other:		
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		
	_		
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 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 weltwarts 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)



Place, date





Declaration of consent to the forwarding of application documents , 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: First name What is your relationship with the volunteer? Family name POSTCODE Street, house no. Location Telephone Mobile phone email Declaration of consent for informing an emergency contact , (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.

Signature (digital signature possible)







Declaration of consent from the emergency contact

I, , , t	nereby give my consent for my personal data (name, address,
telephone number, e-mail) to be entered in	n the ADRAlive! application form as an emergency contact by the
applicant .	
I agree that ADRA Germany e.V. may conta	act me in the event of an emergency.
Place, date	Signature (digital signature possible)