



Volunteer Application Form

Name & Surname	
Address	
Identity Number	
Date of birth	
Gender	
Dependants	
Cell phone number	
Telephone number (Home and/or Work)	
Email address	

Availability:

Approx. date you would like to start volunteering?	
Which days and times are you available for volunteering?	
How long do you expect to be available to volunteer?	
What kind of volunteering work would you like to do? Admin, ad hoc, hospital visits, caring, events, other?	
Own transport? (Yes/No)	
Public transport? What kind?	

General skills and experience:

Have you had any prior volunteering experience? If so, briefly describe the organisation and your role.

Please list languages spoken, indicating degree of fluency.

Focus Areas:

Indicate Volunteer Team You Are Best Suited To Join

Equine Therapy Programme	
Youth and Young Adult Programme	
Arts, Crafts and all things Creative Programme	
Online Hospice Shop	
Catering and Housekeeping Programme	
International Volunteer Programme	
Fundraising and Events	
Maintenance	
Care Team Volunteer Programme	
Reception Area Volunteer	
Driving	
Gardening Programme	

Additional information:

Please give us your reason for applying as a volunteer and tell us why your experience, skills, qualifications meet the requirements of the post. Please supply any additional information that you feel may support your application.

Please provide two (2) contactable references:

Name & Surname	Contact number	Email address

Declaration

I declare that the information provided by me in this document is correct and will form part of my contract of employment should I be offered a post with Iris House Children's Hospice.

Signed _____ Date _____

Email completed form to ashley@iris-house.org

Iris House Children's Hospice

Charity Number: 2011/004180/08

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(entrance off Old Paarl Road)

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PBO Number: 930043067

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