



Application for

Short Term Volunteers

Return to: IVS GB Thorn House, 5 Rose Street. Edinburgh. EH2 2PR
Tel: 0044 (131) 243 2745 www.ivs.gb.org

<i>Personal Data</i>			
First Name:		Surname:	
Gender:		Nationality:	
Present Address:		Home Address: (if different)	
	Country:		Country:
	Postcode:		Postcode:
Date of Birth:		Telephone:	
Email:		Mobile:	

<i>Further Information About Yourself</i>	
Emergency Contact Name Address Telephone Number	
Passport Number	
Present occupation/studies/ training scheme etc. following or just completed:	
Previous work experience: (paid and/or voluntary work)	
Why do you want to do a project with SCI? (for extra motivation, use a separate sheet of paper)	
What do you think you can contribute to an SCI project as a volunteer?	
Special wishes e.g. vegetarian/Muslim/Jewish food etc, if you want to take a child with you, state child's age	

<p>Any serious accidents, illnesses, disabilities, allergies, regular medication. SCI aims to provide volunteer opportunities to all. All information provided in this form is for the safety and wellbeing of all participants and will be shared only when appropriate.</p>	
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<i>Languages</i>									
	Speak			Write			Read		
	good	fair	slight	good	fair	slight	good	fair	slight
1.									
2.									
3.									
4.									
5.									

<i>Project Choice</i>	
<p>Projects chosen in order of preference. Put project code, name and dates. e.g. BE VIA 6.2 De Wroeter 12/7-26/7</p>	<p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>5.</p>
<p>Motivation: answer the following questions for each of your choices. a) Repeat name of each project b) Why have you choose this particular project? What do you expect from it?</p>	<p>1a</p> <p>1b</p> <p>2a</p> <p>2b</p> <p>3a</p> <p>3b</p> <p>4a</p> <p>4b</p> <p>5a</p> <p>5b</p>

If you wish to take part in more than one project, please print extra copy or photocopy this form and send in a separate form and fee. List 6 project choices in priority order for each application made.

FEES

You must be a member of IVS for the current year at the time you apply for a Project. The membership year runs for 12 months from the date of joining.

Project Registration Fee (including membership)

Costs for Short-Term projects under 3 months

Projects in the UK	Membership and Registration Fees
Employed	£105
Student/unwaged	£55

International Projects	Membership and Registration Fees
Employed	£195
Student/unwaged	£150

If you have paid your IVS membership fee within the last 12 months, then please deduct the membership fee from the above amounts (£35 waged, £15 unwaged/low waged/student).

*Please provide proof of your situation e.g. photocopy of student card, unemployment or similar

The information provided on this form will be held on an IVS database and shared within IVS for purposes of the organisation only.

Please Note:

Additional participation fees: Most of the projects ask you to pay an additional participation fee on arrival in order for the project to take place at all. These are indicated in the project descriptions.

Motivation Letters: If you are asked to send a motivation letter with your application form, please do so. It doesn't have to be an essay, just a reasonable length paragraph explaining clearly why you are applying for that particular project.

Eligibility: Please make sure that you meet the criteria when applying for projects which come under our North South Program. If you're not sure, do contact the office first.

Conditions of Participation / Insurance
You must take out proper private insurance cover before going abroad. This is a condition of participation in the Project. This cover should include full accident and medical insurance for all eventualities. If possible, it should also cover travel costs, just in case your project is cancelled at short notice.
If you are travelling in Europe, make sure you have a valid European Health Insurance Card with you (available from the Post Office or EHC website – it provides reciprocal health care in EEA countries and Switzerland).

I am: (please tick and provide proof of status)	Waged	<input type="checkbox"/>	Student	<input type="checkbox"/>	Unemployed	<input type="checkbox"/>
I enclose a Cheque/Postal Order made payable to "IVS" for:	£					
(For Taxpayers) Part of the payment will be eligible for Gift Aid. I would like IVS to reclaim the tax on the eligible part of this payment and any donations or membership subscriptions that I make. I have paid an amount of UK income tax or capital gains tax equal to any tax claimed						
				Yes	<input type="checkbox"/>	No
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Preparation Workshops

As well as giving practical advice and information on travel, money, insurance, what to bring etc. the Preparation Workshop goes into more detail about the role and benefit of International Volunteer Projects, guidelines for participation etc. Child and Vulnerable Adult Protection Training will be provided at the Preparation Days for all volunteers who require it.

IMPORTANT: Child and Vulnerable Adult Protection Training is compulsory for those volunteers working with or around children or vulnerable adults.

IMPORTANT: Attendance at the Preparation Day is compulsory for first time volunteers and encouraged for experienced participants.

Preparation Days will be held in London, Edinburgh.

Please tick the venue you will attend.

London	May 19 th		July 21		
Edinburgh	June 23 rd		Sept 1 st		October 6 th

Evaluation Workshops / Social Event

These are recommended to all volunteers. You are given the chance to meet other volunteers and to talk about your project experiences – positive and negative ones. We use the workshops to improve the program. You will also discover details of other activities and opportunities to get involved with in IVS. And have a great time sharing experiences and socializing with other IVS members.

Reunion Day 2012 in	LONDON 10 th NOV 2012	
	EDINBURGH 24 th NOV 2012	
I confirm that I will attend the Reunion Day	Yes	No

IVS/ SCI expects all volunteers to participate in the whole programme including preparation, participation and evaluation. I have read and understood the conditions of participation.

Your Signature:

Date:

(Your application can not be processed without your signature here).

By returning this completed form you are agree to the Terms and Conditions laid out on our website and to the Cancellation policy of IVS.

PLEASE POST/EMAIL THIS FORM WITH PAYMENT OF THE APPROPRIATE FEE TO:

PLACEMENTS

IVS GB

Thorn House

5 Rose Street

Edinburgh

EH2 2PR

T; 0131 243 2745

Email: info@ivs.gb.org

EQUAL OPPORTUNITIES MONITORING FORM

As part of our commitment to ensuring Equality of Opportunity in all areas of our work, please would you help us by completing this monitoring form. It will help us see how close we go to achieving our aim of including all members of the community in volunteering opportunities available through IVS. The information you provide here will be treated anonymously and confidentially. Many thanks

Please Tick

1.	Male	Female	Date of Birth
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2.	Age	Under 16	16-17	18-19	20-21	22-25
		26-35	36-45	46-59	60-64	Over 65

3.	Nationality
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4. How would you describe your ETHNIC HERITAGE? (see below ~ please tick)						
Asian or Asian-British						
Indian	Pakistani	Bangladeshi				
Other (please specify)						
Black or Black-British						
Caribbean	African	Other (please specify)				
Chinese or other ethnic group						
Chinese	Other (please specify)					
North African						
Arab	Other (please specify)					
White	British	Scottish	English	Irish	Welsh	Other

5. DISABILITY: Would you describe yourself as being affected by any of the following (please tick)			
Hearing impaired	Speech impediment		
Mobility impairment	Learning Disability		
Mental illness	Other (please specify)		
Visual Impairment (not corrected by spectacle or contact lenses)			
Physical disability (please specify)			
Are you registered disabled?		Yes	No

6. Would you describe yourself in any of the following categories (please tick as many as you want):							
Disadvantage living in rural area	Disadvantage living in urban areas	Employed	Young Person				
People living in inner cities	Unemployed	On low income	Physical Illness	Victim of Crime			
Affected by AIDS/HIV	Substance user	Young offender	Refugee	Offender			
Ex Offender	Victims of Abuse	Asylum Seeker	Homeless	Traveller	In debt		
Minority ethnic community	Gay men/ Lesbian woman	Lone Parent	Families	Carer			
Living in Care	Student	Further Education	Full Time Education	Privileged			
Social exclusion	Women & Girls	Disadvantaged young people	Disaffected young people				
Other Groups (please tell us)							

7. RELIGION/FAITH	Do you practice any faith?	Yes	No
	If yes, how would you describe your faith?		

8. How did you learn about IVS?			
Friend/Relative	Word of Mouth	Previous participant	
Internet	Search Engine	Website Advertisement	
Library/Careers Centre	Where		
Printed publicity	Book	Leaflet	Advert
Volunteer Development Project	Educational establishment		