

Candidate's Application for the volunteer programme

Please read carefully before answering. 2 copies for EdSense e. V. and the host family

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1. Personal data	2. Educational background
Last nameFirst name	Please describe your educational background or training (add some general information about the subjects, the schoo
Sex ☐ Male ☐ Female	or college)
Date of birthPlace of birth	
Nationality Religion Marital status Passport-Nr.	2.
Your first address (street, postal code, city, country)	3
Telefon	Please describe yourself, your strengths and weaknesses
Mobile eMail ————————————————————————————————————	
Persons to contact in case of emergency (two persons are neccessary Please specify by name, address, phone and eMail) 1.	Do you have any international experiences? Please give details. (e.g.: camps and conferences in other countries, contact to foreign persons,)
2	
	3. Voluntary work
Do you have a driver's licence? ☐ Yes, licence-no.: ☐ No	Do you have a current or previous involvement in voluntary work? Please give details.
Would you like to drive in a foreign county? ☐ Yes ☐ No	
Please add a photo here	What is your understanding of voluntary work?
	What are your main reasons for going abroad?

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What kind of voluntary work would you like to do and why? For available options, please read carefully the National Profile and/or Volunteer Service Guide of your future host country.	Do you need to take any pharmaceuticals periodically? What kind of pharmaceuticals?
What challenges and difficultiesdo you think you will encounter during a longer time, living in another culture with a different set of values?	Please complement this form providing additional information about your motivation and expectations on a seperate sheet of paper.
	That's it! Thank you very much!
Please list the countries you wish to go in order of preferences and give some reasons. 1	I am aware that EdSense e.V. is not financially responsible if the exchange programme is interrupted due to war, civil commotion or a natural catastrophe in the host country.
	City, Date
2	Candidate's signature
3	Filled out by association
4. Your volunteer programme	ApplNo.
During which time do you prefer to start and finisch your programme? How long will it take? (duration from min. 3 up to 24 months)	Date of receipt
 starting ending in 	Coordinator's signature
Month Year Duration 1	Notes
5. Health examination	
Please answer a view questions about your healthiness regarding to the missing medical care abroad.	
Do you have any allergies or health problems? Please indicate if existing.	