



P.O. Box 760183, San Antonio, TX 78245
www.ahi-il.org

Abundant Hope International Volunteer Application Form

Date _____

1. Personal Information (please attach personal photo and copy of passport)

Name _____
First Middle Initial Last

Home address _____

City State/Province Postal Code Country

Passport No. _____ Expires _____

Home Telephone No. _____ Cell Phone No. _____

E-mail address _____

Date of Birth _____ Male/Female _____

Dates available: _____ Length of commitment: _____ (maximum stay 3 months)

[One aspect of acceptance for service is based on availability first and dates of proposed service second]

How did you hear about AHI? _____

Have you ever worked at any other mission or humanitarian aid organization? If so, please provide the name of the **ORGANIZATION, LOCATION, DATES, AND POSITION HELD.**

2. Marital Status

What is your marital status? Single _____ Married _____

Name of Spouse: _____ Is your spouse coming with you? Yes / No

If No, is your spouse in agreement with your decision to serve with Abundant Hope International? Yes / No

Will anyone else be coming with you? _____

3. Employment History

Current Employer: _____ Dates: From _____ To _____

Address: _____ City _____

State: _____ Zip _____ Country: _____

Duties Performed _____

If retired, please state your previous occupation _____

4. Temple/Congregation/Church Affiliation

Do you attend a temple, congregation or church? Yes / No

Name: _____

Address: _____

City: _____ State: _____ Post Code: _____ Country: _____

Pastor/Rabbi: _____

5. Purpose

Why are you interested in working with the Holocaust Survivors of Israel? _____

Have you had past experience with cultures outside of your own? Yes / No If Yes, please elaborate: _____

Do you have any fears about visiting and working in Israel? _____

What is your understanding of teamwork? _____

Do you consider yourself to be a leader or a servant? Explain why _____

What kind of qualities do you feel are necessary to serve as a volunteer assisting Holocaust Survivors? _____

Give an example when you needed to adapt to a new situation and the result of your actions: _____

How do you personally feel this volunteer experience could benefit you? _____

6. Your Creative, Artistic and/or Abilities:

Do you have any specific skills you could see yourself contributing to the outreach of AHI? If you play a musical instrument, please include if you are interested.

Are you willing to help out, when necessary, in areas other than your designated volunteer position? Yes/No

Talent Inventory

Listed below are various areas of experience useful to Abundant Hope International. Read through the list and check off areas of experience. A blank indicates no experience at all in a particular area; fill in where needed.

A. SUPPORT SERVICES:

- ____ Carpentry
- ____ Construction/Masonry
- ____ Electrical (Israel __ or USA __)
- ____ Gardening
- ____ General Maintenance
- ____ General Cleaning
- ____ Painting

____ Plumbing

Other: _____

B. COMPUTER/DATA

- ____ Computer use / internet
- ____ Data Entry/Spreadsheets
- ____ Word/Excel/Publisher

Other: _____

C. Languages:

Spoken / Written / Read (circle)

_____ S / W / R

_____ S / W / R

_____ S / W / R

D. ARTS AND CRAFTS

____ Sewing/Needlework

____ Knit & Crochet

____ Painting

Other: _____

Describe your strengths/weaknesses in the following areas (circle / indicate one):

- | | |
|-------------------------------------|--------------------------------|
| a. Common sense / initiative | POOR / FAIR / GOOD / EXCELLENT |
| b. Relating to others | POOR / FAIR / GOOD / EXCELLENT |
| c. Integrity/honesty | POOR / FAIR / GOOD / EXCELLENT |
| d. Teamwork | POOR / FAIR / GOOD / EXCELLENT |
| e. Self-discipline | POOR / FAIR / GOOD / EXCELLENT |
| f. Following instructions | POOR / FAIR / GOOD / EXCELLENT |
| g. Adaptability | POOR / FAIR / GOOD / EXCELLENT |
| h. Unselfishness | POOR / FAIR / GOOD / EXCELLENT |
| i. Willingness to go the extra mile | POOR / FAIR / GOOD / EXCELLENT |

7. References

Name: (Pastor or Spiritual leader) _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ How long have you known them: _____ E mail: _____

Name: (Friend) _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ How long have you known them: _____ E mail: _____

8. Health

Is your general health - Excellent / Good / Fair / Poor? _____ Blood Type _____

Do you have any disability or physical handicap that may create difficulty in fulfillment of your volunteer service?

Yes / No If yes, please relate briefly: _____

Have you ever suffered from any form of mental or emotional illness? Yes / No (If yes, please give details)

Are you allergic to any medication or foods? Yes / No (If yes, please give details) _____

Are you currently on prescription medicine? Yes/No If so, please list medications _____

9. Health Insurance

Are you covered by medical insurance: Yes / No If yes, please supply the name and address of the Insurance Company:

Name: _____ Policy Number: _____
Address: _____ City: _____
State: _____ Zip: _____

Abundant Hope International does not provide any medical coverage for Volunteers at this time.

10. Emergency Contact

Name: _____
Address: _____
City: _____ State: _____ Zip: _____ Country _____
Telephone: _____ Mobile phone: _____ E mail: _____

Rules and Regulations

I understand that:

- Volunteer Staff must pay their own round trip transportation and all personal/travel expenses while in Israel. Abundant Hope International will provide shared housing in one of AHI's Volunteer lodging accommodations; a small donation to cover utilities would be appreciated while accomplishing work for AHI. AHI will cover public transportation costs while traveling for AHI business. Keeping track of basic travel expenses is highly encouraged.
- Volunteer first-time assignments can be seven days up to a maximum of three months. All assignments must be arranged prior to arrival.
- Please be aware a criminal background check may be conducted if the AHI Board requires it.

"I acknowledge my responsibility to provide my round-trip transportation as well as all personal/travel expenses while serving with AHI. I hereby certify that I have verified all information given above is true and correct. Should I be accepted, and placed as Volunteer in Israel, I agree to place myself under the authority of the board of AHI during my term of service and all AHI staff placed as my authority and abide by accepted standards of conduct of AHI. Should I act otherwise, I will be requested to vacate the position."

"If I am accepted as a Volunteer I am willing and able to raise my own support for trips and I agree to abide by the AHI mission statement, AHI's policies and standards required of any Volunteer for Abundant Hope International and within the Volunteer Guidelines.

Applicant Signature

Date

Our application review process can take a **minimum** of six weeks from the date it is received.

Please email completed application to volunteer@ahi-il.org or send by post to:

AHI, P.O. Box 760183, San Antonio, TX 78245 attn: Volunteer

Please write any relevant personal history of yourself

and attach it as a separate page.