Application VOLUNTARY SERVICE in *German Hospice Jerusalem*



German Hospice "Regina Angelorum" St. Charles Convent Lloyd George Street 12 P.O.B. 8020 IS - 91080 Jerusalem

Tel.: 00972-2-563 77 37 Fax: 00972-2-563 60 78 Mail: info@german-hospice.de Web: www.german-hospice.de

Personal data:

First name:	
	
Address:	
Phone:	
D 0 D 1	
Day of Birth:	in:
Religion:	
Family status:	\Box single \Box married \Box widowed \Box divorced
	Please mark your skills in foreign languages by setting a cross in the scales below (left: hardly – right: perfect)
Native language:	Talk: X/ Write & Read: X/
	Talk:
roreign language(s).	Write & Read:
	Write & Read: / Talk: /
	Write & Read:
	Talk: Write & Read:
Driving licence:	\square yes \square no if yes, class:
G	
Profession:	

Conta	act address (for eme	rgency):
	First name:	
	Surname:	
	Address:	
	-	
	Phone:	
	i nonc.	
]	Your relationship: _	
Accer	otation of mutual c	onditions:
1.	I support the sisters in	n German Hospice voluntarily and honorary.
2.	When I become volume	nteer, I am at least 18 years old.
3.	Due to my work I get	accommodation and meals for free.
4.	<u> </u>	d pay for my airfare, health and other insurances. In addition, ne calls and faxing as well as drinks and other private wishes
5.	I work at least five d	ays a week, eight hours a day. If the sisters need support, I will my labour time flexibly.
6.	I can collect six free can't be permitted.	days for leisure time or travelling. Vocations or special holidays
7.	I accept to get differen	ent tasks in the house.
8.	Due to the high tem work might be harder	perature during the summer months, I know and recognise that r than normally.
9.		riate and discrete clothes . Please avoid short-armed shirts and a rousers and skirts should cover the knees.
_		d mutual conditions for voluntary working in <i>German</i> signing this paper:
City.	, Date	Sign

In order to volunteer in our house, you have to send us this filled application form and a Curriculum Vitae. The mutual conditions must be signed, too.