



# Camphill Farm Community Hermanus

*'Quality of life for adults with intellectual disabilities'*

## VOLUNTEER APPLICATION FORM

### PERSONAL DETAILS

1. Name	
2. Address	
3. Telephone/Fax	
4. Email	
5. Date and country of birth	
6. Nationality	
7. South African applicant: I.D. Number	
8. Foreign applicant: Passport number	
9. Home language	
10. Name, address & telephone number of a relative or close friend (state relationship)	
11. Marital status	
12. Do you have medical insurance? (Please give details)	

### EDUCATION AND WORK EXPERIENCE

13. Highest level of secondary education attained :  
14. Tertiary education :  
15. Work experience :

### GENERAL INFORMATION

16. I would like to join from (earliest date) :  
17. for a minimum period of or :  
number of days per week :

Tel: +27 (0)21 200 2230 | Cell: +27 (0)72 999 9988 | [sam@camphill-hermanus.org.za](mailto:sam@camphill-hermanus.org.za) | [www.farm.camphill-hermanus.org.za](http://www.farm.camphill-hermanus.org.za)  
Camphill Rd, Off Caledon Rd, Hemel en Aarde Valley, Hermanus, 7200, Western Cape, South Africa | PO Box 301, Hermanus, 7200,  
Western Cape, South Africa

003-322 NPO | Reg. No 1978/003803/08 | PBO No 18/11/13/4249

A list of directors is available at the offices of Camphill Farm Community Hermanus

18. What is your motivation?

19. To which workshops do you think you could contribute? :

21. Have you ever visited a Camphill Community? :

22. If Yes: Which one and for how long? :

23. Do you have a valid driver's licence? :

24. If yes, when did you obtain it? :

25. Do you play a musical instrument or have other artistic skills? :

#### GENERAL HEALTH

26. Do you suffer from allergies? Please specify. :

27. Do you suffer from chronic illness or physical disabilities? :

28. Do you have psychological problems/breakdowns? :

Be assured that any health issues you share will be treated with respect and does not necessarily exclude you from acceptance as a volunteer. It is in the best interest of all to look realistically at any possible implications in advance of you joining the Community.

#### DRUG USE

29. Have you taken prohibited drugs? :

30. If yes, did you stop, and when? :

31. Drug testing consent (Please tick box) :  YES  NO

Please be aware that in South Africa, Marijuana is an illegal drug. Camphill has a non-tolerance policy to all illegal drugs and offenders are prosecuted by the state.

#### POLICY STATEMENTS

31. It is not permitted to give/sell/donate any item or gift to any resident nor purchase/accept any item or gift from any resident without explicit permission from the relevant house leader.

32. Please note that it is considered to be a misconduct if A volunteer commits an offence relating to the physical, psychological, sexual or emotional abuse of any resident which may include physical aggression, inappropriate speech and rudeness etc. Sexual contact of any kind at any time between a volunteer and a resident is prohibited and will result in criminal charges being filed.

Please *tick* the items you have sent or are included:

- Volunteer application form
- Curriculum Vitae
- Two **written** references
- Acceptance and Indemnity Form signed by you
- Police clearance certificate

**CAMP HILL FARM COMMUNITY HERMANUS  
ACCEPTANCE AND INDEMNITY FORM**

- a) I , ....., hereby confirm that I have read, understood and agree to all conditions as stated in the general information sheet.
- b) Our Organization appreciates your interest in volunteering with us, we are looking forward to your service for the betterment of our Community and its posterity. However, the organization cannot be held responsible for anything that happens to you while offering your volunteer services to it:

Signed at: .....

Date: .....

Name: .....

.....  
(Signature)