



## VOLUNTEER APPLICATION FORM

Welcome to the Salesian Institute Youth Projects (SIYP) Volunteer Registration Program. Thank you for your interest in the SIYP. Please submit your CV and a cover letter explaining your interest in SIYP. The following information is required in order for us to process your application.

First Name:

Last Name:

Email:

Mobile Number:

Gender:

Date of Birth:

Nationality:

How did you hear about Salesian Youth Projects?

**If you attended college, what did you study?**

**Work History to date:**

**Have you volunteered with other organizations? If so, please share details (length of stay, your role, outcomes, impact on the organization)**

**In terms of your intentions to volunteer with SIYP, what contribution do you believe you can make to any of the following sectors:**

**Programs:**

**Finance/Administration:**

**Management Training:**

**Communications/Digital Marketing:**

**Fundraising:**

**Research:**

**In terms of your own goals, what expectations do you have during your volunteer experience with Salesian Institute Youth Projects (SIYP) and what specific contribution do you believe you will have made?**

**How much time are you willing to volunteer? *Please place X in relevant box.***

3 months     6 months     12 months

**Outside of work, what are your hobbies?**

**Any other relevant information/notes you would like to share?**

**Please provide Please provide the names and addresses of two people (not relatives) whom we could contact for a reference, preferably people who are familiar with your work with children or with Salesian Institute Youth Projects.**

Name:
Relationship:
Address:
Phone:
Email:

Name:
Relationship:
Address:
Phone:
Email:

Once completed, please return this form to [shandre.slinger@salesianyouth.org.za](mailto:shandre.slinger@salesianyouth.org.za)

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