



Dear Applicant,

Thank you for your interest in the *Lighthouse Children's Shelter*. Please find enclosed with this letter a volunteer application form and two letters of reference forms.

Lighthouse is a shelter providing competent and loving care and accommodation for abandoned and HIV children. We desire to place our children in permanent families as soon as possible. *Lighthouse* is in partnership with *SA Cares for Life*, a Christian networking body of centers across the country providing abstinence training, crisis pregnancy care, and post-abortion counseling and adoption services. As such, we request all our volunteers to hold to these basic values.

If you are interested in joining with us in looking after these desperately needy children, please:

- Completely fill in the application form.
- Include two ID size photos of yourself.
- Give one reference letter to your Pastor or Manager at work, and the other to a friend and ask them to post them to us directly. (Your application form will not be considered complete without them.)
- We will call you to arrange an interview.

We request that our volunteers working with the babies will work a minimum of 2-3 hours a week. You will choose which shifts and which days you would like to come and we will try to accommodate you.

If after reading all the enclosed information you have any further questions, please don't hesitate to contact us.

For the children of Africa,

The Lighthouse Administration

P.O. Box 21398, Protea Park, 0305 South Africa
Cell: 072-125-4683 E-mail: betzer@mweb.co.za
Section 21 Reg. No. 9824973 016-270 NPO
VAT Reg. Number: 4770197921

LIGHTHOUSE CHILDREN'S SHELTER

Volunteer Application Form

Thank you for inquiring about our volunteer program. Please note that although we always need volunteers it does take some time to get into the system in order to be an active volunteer. You will be required to come for one interview, which includes an orientation session. Obviously our screening procedure is intense as we are looking after very special children. A volunteer is a person doing a task that needs to be done without remuneration, out of his or her own free will and with total commitment.

Please fill out the questionnaire below and attach a photo of yourself to this form.

First/Last Name:	
Physical Address:	
Postal Address:	
ID#:	
Home#:	
Cell#:	
Work#:	
Email Address:	
Birth Date:	
Home Language:	
Other Languages:	
Contact Person:	
Contact#:	
Contact Address:	

Children at **Lighthouse Children's Shelter** are between 0 and 6 years of age. Many of these children will be infected with HIV and therefore AIDS training can be arranged for volunteers.

Do you have any objections to the following:

Working with children of a different race or cultural group? Y / N

If Yes, please explain: _____

Working with children that are HIV positive? Y / N

If Yes, please explain: _____

Do you have additional concerns regarding the above? Y / N

If Yes, please explain: _____

General Questions:

Do you have your own transport? Y / N

We want to utilize everyone's skills for the benefit of the babies as well as the organization. Please state your particular training and qualifications. (In particular, do you have training or experience relating to baby care; general office work, etc.)

Please state your current place of employment. _____

Have you had any previous volunteer experience? Y / N
If yes, please state the name of the organization.

What is your motivation for wanting to be a volunteer at the **Lighthouse**?

What do you believe you have to offer these children? _____

In order to be an effective volunteer it is extremely important that your spouse/family support your decision.

Do you have your family's support? Y / N

If No, please explain: _____

Do they have any particular questions or reservations regarding your volunteering? Y / N

If Yes, please explain: _____

Have you ever been accused and/or convicted of child molestation or child abuse? Y / N

If Yes, please explain: _____

Are you willing to provide a Police Affidavit if it is requested? Y / N

If No, please explain: _____

Lighthouse Children's Shelter is foundationally a Christian Organization, we spend time praying for and with the children, listening to Christian music, and teaching the children Christian principles. If you are not a Christian, will you have objection to this during your time at **Lighthouse**? Y / N

If No, please explain: _____

Where and how did you learn about the **Lighthouse Children's Shelter**? _____

Commitment

All of the children in our care are here for one reason: they are in a crisis situation in their life. Our aim is to give them love and stability, as each child's life has been characterized by some type of crisis. It is therefore imperative that if you want to join the volunteer program, you are truly prepared to commit yourself.

Are you prepared to commit yourself to **Lighthouse** for a minimum period of 6 months? Y / N

If No, please explain: _____

In order to communicate effectively with the volunteers we have occasional informational meetings. The meetings are held at the Shelter and the time is usually 17h00 – 18h00 sharp. During these meetings various topics are discussed including the permanency plan for each child. These meetings also serve as training and are both essential and informative. You will be informed in advance of these meetings.

If they do not conflict with your work will you be able to attend the meetings? Y / N

If No, please explain: _____

Please sign and date if you are truly committed to volunteering in helping the children of the Lighthouse Shelter.

Signature

Date

There are many ways to volunteer at the shelter, however there are three general ways to do so. That is by **Indirect Service, Direct Service** and **Foster Care Families**.

1. Direct Service (minimum requirement of 3 hours/week)

These volunteers do have contact with the children. This would include being a caregiver for children while you are here. You could be playing with the kids, feeding, washing, administering medication, preparing/cleaning bottles for feeding or cuddling babies. There is also an occasion where some domestic cleaning of the shelter playrooms, beds, bathroom, and kitchen are needed.

2. Indirect Service (minimum requirement of 2 hours/week)

These volunteers do not have direct contact with the children but their work will help with the children indirectly. These areas are as follows:

Please circle any of these areas you might be interested in.

- Nursing skills
- Reception
- Typing/Basic office skills
- Mending clothes
- Administrative Tasks
- Organizing donations of clothing
- Maintenance
- Collection and transportation of donations
- Child Psychologists willing to volunteer services
- Occupational Therapist willing to volunteer services

3. Foster Care Families

Foster Care families take children on short notice for a crisis period while more permanent arrangements are being made. Should you like more information on our **Foster Care Family Program**, please contact us.

If you are interested in fostering a child, please answer the following questions:

What is your opinion of abortion in general and in particular in the cases of rape, incest and genetic disorder?

What is your opinion regarding single motherhood and/or adoption?

Working as a volunteer can be both rewarding and heart breaking. The aim of the **Lighthouse** is to place children for adoption as soon as possible, but we also care for children in many types of crisis situations who may be with us for an extended stay. It may happen that you become attached to a particular child and that child moves on. While you may be happy for the child it may still be a loss to you. Having HIV positive children we are also confronted by death. Please think how you will cope with the loss, as during some point of your service at **Lighthouse** you may be faced with this.

Should you have any comments or questions regarding this application, please feel free to state them below or contact the Lighthouse office during business hours.

Indemnity

I, undersigned, hereby indemnify **Lighthouse Children's Shelter** against any claim which I may be entitled, or which may arise by reason of any negligent act or omission on the part of the **Lighthouse Children's Shelter**, it's leaders, staff or volunteers, which may lead to my becoming infected with HIV or AIDS, or any other infectious disease.

Signature: _____

Date: _____

Witness: _____

Date: _____

Please give the following reference letters to your Minister or Manager at work and a close friend and request them to send their letters directly to **Lighthouse Children's Shelter**. They will be treated completely confidentially. Your application will not be considered complete without both reference letters.

Volunteer Schedule

Can you commit to the minimum weekly requirement? Y / N

If No, please explain: _____

What days and hours are you currently available to volunteer? Please circle the day and hours that best work for you.

Monday	8am - 11am	11am - 2pm	4pm - 6pm	6pm - 8pm
Tuesday	8am - 11am	11am - 2pm	4pm - 6pm	6pm - 8pm
Wednesday	8am - 11am	11am - 2pm	4pm - 6pm	6pm - 8pm
Thursday	8am - 11am	11am - 2pm	4pm - 6pm	6pm - 8pm
Friday	8am - 11am	11am - 2pm	4pm - 6pm	6pm - 8pm
Saturday	8am - 11am	11am - 2pm	4pm - 6pm	6pm - 8pm
Sunday	8am - 11am	11am - 2pm	4pm - 6pm	6pm - 8pm

If there are other hours you are available, please let us know for consideration.

CONFIDENTIAL REFERENCE LETTER

Name of Reference: _____

Name: _____

Reference's relationship to volunteer applicant: _____

RE: The person mentioned above has applied to be involved as a volunteer at **Lighthouse Children's Shelter**. Our aim is to provide competent, committed, loving care and accommodation for children in crisis, many of which are HIV positive children until such time as an adoptive or permanent family is finalized. Please contact us if you would like further information before completing this application form.

It is very important for us to know as much as possible about prospective volunteers and we take the screening process quite seriously. Please answer the following questions to the fullest. All information you supply will be regarded as strictly confidential and we greatly appreciate the time and thought involved in your reply. Thank you!

How long have you know the applicant? _____

How close of a relationship do you have with the applicant? How well do you know them? _____

Please describe characteristics of their personality? (For example: Are they shy, outgoing, compassionate, etc?)

Please describe their marital and family relationships? _____

Please tell us about their social and spiritual life? _____

What is the extent of their involvement and reliability at their local church or place of work? _____

Do you have any reservations about our accepting this applicant as a volunteer at **Lighthouse Children's Shelter**? Y / N

If Yes, please explain: _____

Would you recommend this person as a volunteer at **Lighthouse Children's Shelter**? Y / N

If No, please explain: _____

Do you have any knowledge of this person ever being accused and/or convicted of child abuse or molestation?

Y / N If Yes, please explain: _____

Signature of Reference: _____

Date: _____

Lighthouse Children's Shelter
P.O. Box 21398
Protea Park 0305
Cell: 072 125 4683 phone/fax 014 594 0052

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