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Office Use Only

#### HARAMBEE JUNE 2020 Volunteer Project in Kenya

## SECTION 1 – PERSONAL INFORMATION

### NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Name exactly as it appears on your passport (this is required for your flight booking) -

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DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_ NATIONALITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ GENDER: \_\_\_\_\_\_\_\_\_\_\_\_

CONTACT TEL. NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MOBILE NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_T- SHIRT SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WOULD YOU LIKE TO RECEIVE INFORMATION VIA POST OR EMAIL? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*If you do not check your email regularly please do not select email.*

HOW DID YOU HEAR ABOUT BRIGHTER COMMUNITIES WORLDWIDE?

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HAVE YOU PARTICPATED IN A PREVIOUS PROJECT WITH US or A SIMILAR AGENCY? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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SECTION 2 – PROJECT INFORMATION

PLEASE TICK WHICH DATES & DURATION YOU ARE APPLYING FOR –

**June 2020 – closing date 29/02/2020**

* 2 week option – June 6th to 20th
* 3 week option – June 6th to 27th

WHY DO YOU WANT TO PARTICIPATE IN HARAMBEE 2020 IN KENYA?

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HAVE YOU WORKED AS PART OF A TEAM BEFORE? *Please give details.*

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HAVE YOU EVER TAKEN PART IN A COMMUNITY DEVELOPMENT PROJECT OVERSEAS BEFORE: *Please note - this is NOT essential. If yes, please give details.*

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DO YOU HAVE EXPERIENCE IN TRAVELLING TO OR WORKING IN ANOTHER COUNTRY? *Please note - this is NOT essential. If yes, please state if as a tourist or for work.*

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WHAT KIND OF CHARACTERISTICS DO YOU THINK AN OVERSEAS VOLUNTEER NEEDS TO HAVE AND TO WHAT EXTENT DO YOU THINK YOU HAVE THESE?

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WHAT ARE YOUR EXPECTATIONS OF THIS EXPERIENCE AND WHAT KIND OF CHALLENGES DO YOU THINK YOU WILL MEET?

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HEALTH – due to the nature of overseas volunteer work we are obliged to ask you – Do you have any medical condition, disability or history of psychiatric illness that could adversely affect your time in Kenya? This information will be held in strict confidence.

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IF EMPLOYED, What is your current occupation?

IF RETIRED, What was your former occupation?

IF A STUDENT, What are you studying?

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**REFERENCES –**

Please provide the names & full contact details of two people who you know will be willing to provide an opinion on your suitability for this volunteer placement (excluding family members)

We reserve the right to contact them during the selection process.

REFEREE 1 –

Name – \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address – \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Contact number - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address – \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFEREE 2–

Name – \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address – \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Contact number - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address – \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ANY OTHER INFORMATION – Please feel free to add any other information here that you would like to provide. Use additional sheets if you wish.

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DECLARATION –

*Please tick each item & sign below*

* I declare that to the best of my knowledge the information I have given is correct.
* I am willing to submit to the Garda vetting process if requested
* I confirm that nothing in my personal or professional background makes me unsuitable for a volunteer placement which involves vulnerable adults or children.
* I agree to raise the sum of € 2,250 (3 weeks) or €2,000 (2 weeks) for personal costs and €1,000 for fundraising costs
* I will participate fully in the Brighter Communities Worldwide Volunteer training programme

Signature – \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please send the completed application form along with a €500 non-refundable deposit to:

Brighter Communities Worldwide, 4 The Crescent, Mill road, Midleton, Co. Cork P25 H302

Or [harambee@brightercommunities.org](mailto:harambee@brightercommunities.org) phone: 021 4621748

Contact us for bank account details if you would like to transfer your deposit directly.

**Closing date for applications is 29/02/2020**

**Note** – we will hold the personal information you share with us only for the purpose it is intended for but we would like to keep in touch in the future. If you would like to subscribe to our mailing list for monthly newsletters and updates please tick here \_\_\_\_\_\_\_\_\_\_\_\_\_

You can unsubscribe at any time by:

**Writing** to us at 4 The Crescent, Mill Road, Midleton, Co. Cork, Ireland

**Emailing** us at info@brightercommunities.org

**Using** the unsubscribe link in any email we send to you.

You can also find our **Data Privacy Statement** at www.brightercommunities.org