

**BOTSWANA GENDER BASED VIOLENCE PREVENTION AND
SUPPORT CENTER
VOLUNTEER APPLICATION FORM**

Personal information

Name _____

Postal Address _____

Physical Address _____

Phone (work) _____

Phone (cell) _____

Email address _____

Sex _____

ID / Passport Number _____

Area of interest

Which area of BGBVC would you like to be involved in? Please be specific, it is challenging for us to place you “anywhere”.

We are always looking for opportunities to increase the number of volunteers contributing to BGBVC. We welcome any suggestions you have as to how you can use your skills at BGBVC. Do you have any special skills, talents, training or service experience that may be helpful to BGBVC? (e.g., *Counselling experience, construction and building maintenance, catering*)



What language(s) do you speak, read and write?

Why do you want to volunteer for the BGBVC and what do you expect to gain from this experience?

Awareness of BGBVC

How did you hear about BGBVC?

- BGBVC Facebook page
- BGBVC staff / volunteers
- BGBVC website

Other (specify): _____

Desired schedule

Please indicate the dates and times you are available

- Monday _____ (Hours)
- Tuesday _____ (Hours)
- Wednesday _____ (Hours)
- Thursday _____ (Hours)
- Friday _____ (Hours)
- Saturday _____ (Hours)
- Sunday _____ (Hours)

Past volunteer experience

Organization 1 _____

Volunteer position and Duties _____

Supervisor phone _____

Supervisor email _____

Organization 2 _____

Volunteer position and Duties _____

Supervisor phone _____

Supervisor email _____

Education and training

Please list your education history and related training in the table below (starting from Secondary school)

School	Location	Qualification	Course duration

Professional information

1. _____ Employer

Position and Duties _____

2. _____ Employer

Position and Duties _____

News from BGBVC

We enjoy sharing our news with our supporters. Please specify if you would like to receive news from BGBVC about events we are holding and type of work we are undertaking:

- Yes please send me information
- No thanks

Emergency contact

In case of an emergency please provide details of the person we should contact

Name _____

Address _____

Phone _____

Relationship to volunteer _____

I fully understand the above questions and certify that all information provided is true and accurate to the best of my knowledge. I grant consent to BGBVC to verify its accuracy as well as to contact the references I have listed to determine my suitability for a volunteer position with BGBVC. I release BGBVC from liability in connection with the verification of this information.

I agree to obtain a **Police Clearance Certificate** if BGBVC requests.

Signature

Date

Submitting your application

Thank you for taking the time to complete this application. Please submit this form and your CV to admin@kagisanowomenshelter.org.bw or hand deliver to Ext. 19, Plot 6062/3, Tshimotharo, Broadhurst GABORONE.

We will contact you once we have reviewed your submission.

Volunteer & Staff Member's Declaration of Confidentiality

I, _____, declare that I will keep in strictest confidence any personal details or confidential information, particularly concerning clients of the Botswana Gender Based Violence Prevention and Support Center (BGBVC), which may become known to me during the course of my duties as volunteer/staff member of BGBVC.

I understand that the term "personal and confidential information" includes any information concerning a client's personal details, family details or any information about their circumstances or their financial affairs. I also understand that I should not disclose names of any client, either admitted at the Shelter or receiving any counselling services at the Drop-In Centre or past clients. I have been made aware in my capacity as volunteer/staff member of BGBVC not to disclose or make references, which would identify them to unauthorized persons.

I undertake neither to disclose any such information to an unauthorized person nor to discuss it with any person in any public place or where others could over hear it.

I undertake to maintain this duty of confidentiality after my term as volunteer / staff member of BGBVC comes to an end. I further understand that any unauthorized disclosure of information by me will result in the termination of my role as volunteer / staff member of BGBVC and may also render me liable to legal action.

Signature

Date

Personal details include Religion, Medical Condition & Treatment, Sexual Orientation and HIV status.

Unauthorised persons: Client's relatives, friends and neighbours; Medical Staff, Counsellors and Social Workers not involved in the case of the client; Members of the public including family, friends and neighbours of volunteer/staff member; telephone callers purporting to be medical, social staff or relatives, etc.

BGBVC Volunteer Participation Agreement

Project Description: _____

Location: _____ **Date:** _____

I agree to release, discharge and hold harmless, Botswana Gender Based Violence Prevention and Support Center, its employees, agents, and members from any and all claims or demands due to personal injury, illness or death as well as any and all property lost or damage sustained of any nature which may be incurred by me, whether in foreign or domestic territory, while participating in the above named event or activity.

I also agree to be directed by and responsible to the designated leadership for this volunteer position. Further, I agree to hold harmless and to indemnify Botswana Based Violence Prevention and Support Center as a result of my participation.

I agree to conduct myself on Botswana Gender Based Violence Prevention and Support Center property and in public places in an appropriate manner and uphold the core values of Botswana Gender Based Violence Prevention and Support Center.

I agree that I have read the volunteer information and fully understand the expectations therein and pledge to act accordingly.

I agree to participate in any / all orientation and training programs assigned by Botswana Gender Based Violence Prevention and Support Center Volunteer Department during my engagement with Botswana Gender Based Violence Prevention and Support Center.

I agree to keep to the hours of work agreed on and be flexible if required. If I fall ill or have a last minute crisis and I am unable to report for duty, I will contact my supervisor to inform them as soon as I can. If I know in advance that I will be away, I will inform my supervisor so that alternative arrangements can be made.

If you are no longer able to fulfil your commitment, please inform your supervisor as soon as possible.

Signature

Date

