SAVIO

Salesian Volunteers Ireland & Oversees Application Form



(Boxes will expand as you type in them)

Pe	rso	na	lЫ	ata

1. Name:			
2. Date of Birth:			
3. Current Address:			
5. Current Address:			
4. Contact phone numb	ers:		
5. E-mail address:			
() () ()			
6. Marital Status:			
7 Number of Dependen	oto:		
7. Number of Depender	11.5.		
8. How did you find out	about the Salesians?		
Education, Experience	and Skills		
1. Educational Backgrou			
Establishment	City/Country	Dates	Qualifications
,			<u>, </u>
2. Occupational Background	ound - please list most r	ecent employment	
Employer	City/Country	Dates	Nature Of Work



Language To what level? 4. Do you, or will you, have any professional qualifications (e.g. nursing, teaching etc)?	
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5. Do you have any technical skills? If so, please list.	
6. Please indicate any past volunteer experiences.	
Organisation City/Country Dates Nature Of Wo	rk
7. Please indicate any church activities with which you have been involved.	
Group Dates Nature of Activity	
8. Do you have any sports, music, or arts ability or interest?	
Interests and Motivation	
Interests and Motivation 1. Why do you want to have a Volunteer Mission experience with a Christian Community?	
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3. A Salesian International Volunteer is expected to be a Christian witness. Do you consider yourself a mature, committed Christian? Please expound.
4. If you are not a Roman Catholic, of what religion/faith are you? People of all denominations are welcome to volunteer with us.
How do you feel about the prospect of living, working and praying in a Roman Catholic Community?
5. Have you ever worked with children or teenagers? In what capacity?
6. What do you like most about working with them?
7. Is there anything you dislike about working with them?
8. Have you ever had to deal with a young person who needed discipline? How did you deal with him or her?



9. What do you feel you might contribute as a Salesian Volunteer?
10. What type of service are you looking for?
11. What are your highest priorities?
12. If you do not become a Salesian International Volunteer, what are your alternative plans?
13. How does this international mission experience fit into your career goals and aspirations for the future?
Health Declaration
1. Are you currently attending a doctor's surgery or hospital? If 'yes' please provide details why;
2. Are you currently taking any medication or having any other treatment from a
doctor, hospital or other medical practitioner? If 'yes' please provide details



3. Do you suffer from any medical cond	ditions which significantly affects your
SIGHT?	Yes/No
HEARING?	Yes/No
WALKING?	Yes/No
ABILITY TO CLIMB STAIRS?	Yes/No
ABILITY TO BEND?	Yes/No
ABILITY TO LIFT?	Yes/No
STAMINA?	Yes/No
*please note a 'yes' answer does not n answered 'yes' to any of these, then ple	ecessarily debar you from being a Volunteer. If you have ease give details
4. In the past FIVE (5) years have you h 'yes' please provide details and dates	ad ANY hospital admissions or outpatient treatment? If
5. Have you ever suffered from any of t	he following:
i. Depression, anxiety, stress related ill	ness or other mental health problems, including self-
harm and eating disorders?	Yes/No
ii. Blackouts, fits, epilepsy or faints?	Yes/No
iii. Heart problems?	Yes/No
iv. Diabetes?	Yes/No
v. Breathing difficulties such as asthma	? Yes/No
vi. Back, neck or other problems with a	rms, legs and joints? Yes/No
vii. Alcohol or drug dependency or mi	suse? Yes/No
If 'yes' please provide details of the time treatment;	e you had off sick and the date(s) you received



hepatitis? If 'yes' please add dates and details.
7. What is your current weight and height?
Weight: Height:
8. How many cigarettes do you smoke a day?
9. What is your alcohol intake per week in units ? (1 unit = a glass of wine or ½ pint of beer)
10. If you are currently in employment, how many days sick leave have you taken in the past year?
I declare that to the best of my knowledge, the answers given to the questions in this section are full and correct.
Please initial and date:
Additional Data
1. Geographical preferences for volunteer placement
1. 2. 3. 4.
2. I confirm that appointment will be conditional upon the receipt of a satisfactory response to a check of criminal records, via a Garda check, before the appointment is confirmed [this will include details of cautions, reprimands or final warnings, as well as convictions]
Please initial and date:



3. Salesian International Volunteers work without accommodation. The Mission experience may of university. Are you in a position to make this sacr	f necessity interrupt, or postpone a career or
4. Salesian International Volunteers are expected service. Is this acceptable to you?	d to complete a series of training before their
5. How long are you available for service?	
6. When would you like your service to commen	ce?
7. On a separate sheet, please write a one page explaining what prompts you to seek Internation Salesians. Include details about yourself that will objectively and find a suitable assignment for yo	al Voluntary mission work specifically with the help us to consider your application
Please return your:	То:
1. COMPLETED APPLICATION FORM 2. ONE PAGE PERSONAL STATEMENT 3. TWO RECENT PASSPORT PHOTOS 4. NAMES AND ADDRESSES OF TWO REFEREES	Fr Dan Carroll SDB Salesian Community, Don Bosco Road, Pallaskenry, Co. Limerick





www.savio.ie

