



## Volunteer Application

Thank you for your interest in volunteering with Embracing Hope Ethiopia. We believe that volunteering with an organization working among the poor can be a mutually beneficial experience in which you grow as well as a positive impact is made on the children, families and the communities in which we serve. At the same time we know that, if not done thoughtfully, working among the poor can do untold harm unknowingly and unintentionally. Therefore we have this application process to screen all potential volunteers for your benefit, the families' benefit, the community's benefit and our benefit.

Please fill this application out in its entirety and then submit to [info@EmbracingHopeEthiopia.com](mailto:info@EmbracingHopeEthiopia.com). All applications are screened by our in-country staff who will be in contact if more information is needed. We ask that you not take it personally as we try to look out for the best fit for you, ourselves, the community and the families whom God has entrusted to our care. Thank you for your interest in working with us and for putting your hands and feet into seeing others embracing hope in all of life.

Name

Address

City

State

Zip

Country

Phone

Email

Personal Blog or Website

What is your timeline in coming to Ethiopia

I am interested in working as a/an :

- Short Term Cross Cultural Worker (less than 1 year commitment)
- Medium Term Cross Cultural Worker (1 – 2 year commitment)
- Long Term Cross Cultural Worker (minimum 3 year commitment)
- US Based Staff Member
- Other



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Age                      Sex                      Marital Status

Number of Children & Ages

Names & Ages of other family members or friends who would be coming with you:

Education

Occupation

Faith Background & Current Expression

Please tell us a bit about your faith background:

What skills do you feel you would be offering our children, our families and the people of a slum area?



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Do you have experience in any of the following? (Special needs we have on an ongoing basis)

- Medical (Doctor, Nurse Practitioner, RN, LPN, Physical Therapist, EMT  
Community Health Care Worker)
- Education (Teacher, Day Care worker, Pre School Teacher, Early Elementary  
Educator)
- Job Creation (Jewelry Designer, Small Business specialist)
- Community Development / Social Action Professional
- Administration

Why would you like to serve with Embracing Hope Ethiopia?

How did you hear about Embracing Hope Ethiopia?

How will you fund your time in Ethiopia?

What Questions do you have for us?



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Please read the following and either mark "Yes" or "No" in the box.

Yes      No

I understand that I am responsible for raising all costs and arrangements involved in volunteering with EHE including, but not limited to: medical insurance, transportation, immunizations, housing, food, in-country transportation, visa fees, etc.

Yes      No

I have been charged or convicted of any crime involving children, the welfare of children, sexual offenses, physical abuse or theft. If yes, please explain:

Yes      No

I agree to provide an up to date Background check upon request.

Yes      No

I agree to read preparatory books that are considered by the organization concerning ministry among the poor. I also agree to write reflection papers as requested by Supervisor or Board.

Yes      No

I agree to leading through serving. I will work in partnership with other staff members of EHE as a team member. I agree to do all things in accordance with that team's decision as well as policy and procedures of EHE. I come as a servant of others and EHE, willing to do whatever is seen as the best place for me to serve.

Yes      No

I agree to conduct myself with high moral standards as a representative of EHE and Jesus Christ. This may include refraining from the following in many settings because of the local cultural beliefs: immoral sexual activity, alcohol, smoking and rough language. This is done out of respect of Ethiopians. More information about cultural sensitivity will be provided once you are on the ground. I also agree to abide by the laws of Ethiopia.

Yes      No

I agree to maintain medical insurance for all of my family members, including a policy which will provide evacuation in the event of a medical emergency or political disturbance.

Yes      No

I agree to abide by EHE's discipline policy for disciplining children.

Yes      No

I agree to make No public statements (including blog posts, Facebook, or other social media) which contains negative comments towards the culture, religion, the people or the government of Ethiopia. I will only post information (including all blog posts, Facebook updates, Tweets



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and other social media as well as print publication) about families, staff, children or programs of EHE after consultation with the EHE Project Facilitator prior to publication. I understand that this is to help protect the project as well as the dignity of the people we serve.

Yes  No  I agree to in under no circumstances give money or ANY other items to children, moms, families, or other community members while conducting my duties as a volunteer of Embracing Hope Ethiopia, except in consultation with the Ethiopia Team.

Yes  No  I agree to a set volunteer schedule that will be made in coordination with the Project Director prior to my arrival.

Yes  No  I agree to acquire the proper Business Visa for all of my family members prior to my departure from my country of origin at my own expense.

Yes  No  I understand that in under no circumstance am I permitted to pay bribes to officials or those in the community, either in the form of money or material belongings. To do so could place the project in jeopardy and is illegal both in under Ethiopian and United States law. In the event that bribes are requested by officials, I agree to report this to the Project Director and my supervisor so that they can take any action deemed necessary.

Yes  No  I understand that this is a project that is designed to empower locals in leadership. Therefore all decisions affecting the on the ground ministry are decided upon as a team in consultation with local staff and the Project Director.

Signature:

Date:

(Your initials in the box serve as signature)