

Volunteering Profile

Will be completed by the agency

Date: _____ Advisor: _____ Freenet Input: _____

Personal Data:

First name:	Family name:	
Street:	City/ Town:	
Telephone:	Mobile Phone:	
Email:	Date of Birth:	
Profession:		
Male: <input type="checkbox"/>	Female: <input type="checkbox"/>	Nationality:
I am already experienced in volunteering:		
<input type="checkbox"/> Yes, namely: _____		<input type="checkbox"/> No

Placement Profile:

• Language Skills:

<input type="checkbox"/> Arabe	<input type="checkbox"/> French	<input type="checkbox"/> Persian
<input type="checkbox"/> Dari	<input type="checkbox"/> Italian	<input type="checkbox"/> Russian
<input type="checkbox"/> German	<input type="checkbox"/> Kurdish	<input type="checkbox"/> Korean
<input type="checkbox"/> English	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Chinese
<input type="checkbox"/> Farsi	<input type="checkbox"/> Paschto	<input type="checkbox"/> Japanese

• Fields of Interest:

<input type="checkbox"/> Accompanying people with disabilities	<input type="checkbox"/> Gardening	<input type="checkbox"/> Take over sponsorship
<input type="checkbox"/> Support/accompaniment (sports, doctor, authorities, leisure)	<input type="checkbox"/> Craft/Technology/Moving	<input type="checkbox"/> Sporting events (e.g. marshals)
<input type="checkbox"/> Catering at events	<input type="checkbox"/> Homework support	<input type="checkbox"/> Animal welfare
<input type="checkbox"/> German lessons for refugees/migrants	<input type="checkbox"/> household assistance	<input type="checkbox"/> Unterstützung Vereinsarbeit (Vorstand, Rechnungswesen)
<input type="checkbox"/> Take over IT/office work	<input type="checkbox"/> Child care	<input type="checkbox"/> Sales
<input type="checkbox"/> Driving services	<input type="checkbox"/> Creative (singing, painting, playing, handicrafts)	<input type="checkbox"/> Read aloud
<input type="checkbox"/> Refugees/Migrants	<input type="checkbox"/> Co-organisation (projects, events, public relations, etc.)	<input type="checkbox"/>

General:

- **Time Conception:** 1-5 hours/week In individual cases more than 5 hours/ week

Regular missions

One-time missions (also sporadically)

Other timings: _____

Should the voluntary commitment be limited in time? Yes, from _____ until _____ No

• **Mobility:**

Do you need a barrier-free workplace? Yes no

Do you have a **driver's licence**? Yes, Category: no

Where should be the location of the job?

in Oberursel Local Environment

What options are available to you for getting around?

By Foot Bicycle Public Transport Car

• **Desired Performance:**

Training – Volunteer Pilot (E-Lotse) Yes No Trial phase Yes No

Training Options Yes No

I would like to receive the NBO newsletter by mail: Yes No

Signature:

1. I **agree** to my data being stored by the Volunteer Agency and used anonymously for statistical evaluations. The data will be treated confidentially and will only be passed on to third parties within the framework of the placement activity.
2. I **agree** that information about me may be exchanged between the volunteer agency and a sponsor with whom my volunteer work takes place.
3. I **agree** that pictures in which I am recognisable may be used within the framework of the public relations work of the Civic Involvement Network Oberursel or of the agency providing the pictures.
4. After receiving the application letter from Netzwerk Bürgerengagement Oberursel, I will apply for an **extended police certificate of good conduct within 4 weeks** by presenting my identity card at my local registration office/ residents' registration office. (The issuing of the extended certificate of good conduct is free of charge because of the volunteer work).
5. I **undertake** to treat all data that becomes known to me in the course of my voluntary work (on behalf of the city or third parties) as confidential and not to pass it on.
6. I have been informed that only voluntary tasks (with the town or with third parties) are arranged by the Netzwerk Bürgerengagement Oberursel.
7. Should a claim arise during my volunteering, I can only make a claim where the volunteering took place.

Oberursel,	Signature:
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Please bring or send the questionnaire back to us. We are available at: Wednesday + Saturday 10-13 a.m.

Our Address: Beratungsbüro Netzwerk Bürgerengagement
Oberhöchstader Straße 7 (Town Council, Side Entrance, Hiero-Hall)
61440 Oberursel
Telefon: 06171 502-180
Email: Zeit_spenden@oberursel.de www.oberursel.de

Thank you very much for your Commitment.

