

1300 St. Francis Road, Santa Rosa, CA 95409 USA

(707) 829-0606

VOLUNTEER APPLICATION

Full name (given, family):						
Current address (until):					
Phone: (H)	(W)			(Cell)		
Current email:	(Other 6	email, if appli	cable:		
Permanent address (if different f	from above):					
EDUC Educational History: List all graduate school, high school, et an interview, you will be require	schools attended. Please do n	WO ded (ded ot list	college, unive	IENCE ersity, busing tool. <i>Note: If</i>	ess, trac	de, seminary, e selected for
School/College	City, Sta	ate	Dates	Field of S	Study	Degree / Certif.
Work History: List the last the last five years, starting with mos	•			-		-
Employer / Organization and address		_				son for leaving

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Additional training or volunteer experiences: Please list any additional training or certificates or volunteer experience here (e.g., internships, teacher certifications, CPR, etc.):

Organization name	Duration (dates)	Brief description	Certificate or certification
and location	and total time spent	1	awarded, if any:

What did you gain from these experiences?

Language Skills: Please indicate your language competency in the following table. Use a 5 for Fluent, 4 for Advanced intermediate, 3 for Intermediate conversational, 2 for Beginning (some facility) and 1 for Beginner.

Language	Speaking	Listening	Reading	Writing
Kinyarwanda				
French				
Swahili				
English				
Other:				
Other:				

Other Interests: Please tell us about your leisure activities, hobbies or talents:

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PERSPECTIVES AND ANALYSIS

Please indicate your level of interest level of interest, "2" for some interest		•	-				below by marking "1" for a high
Teacher Training							Library Responsibilities
Teaching; Subject(s)							
Administrative Work							Building
Bookkeeping							Solar/Electrical
Secretarial							Water Systems
Accounting							General Labor
Please explain what skills, training, or above.	r exp	perier	nce y	ou h	ave l	nad ii	n the areas in which you indicated
SELF EVAI	LUA	TIO	N A	ND 1	INF	ORM	IATION
Instructions: Indicate which side of number.	the c	contir	nuun	ı you	are	on <i>m</i>	ost often. Circle the appropriate
I excel at group work.	1	2	3	4	5	6	I excel with independent work.
I like to have a consistent routine of assignments.	1	2	3	4	5	6	I like to experiment with projects each day.
I seek interaction with many people	1	2	3	4	5	6	I seek interaction with fewer people.
I like to initiate projects.	1	2	3	4	5	6	I like to carry out projects others assign.
1. Think of a job you found reward you?	ing.	Wha	t asp	ects	of t	he jo	b made it a good experience for
2. Describe a time when you encoun supervisor. How did you commu				•			<u>-</u>

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3. What	causes you stress? How do you respond to or cope with stressful situations?
	would your friends say that they like about you? In what areas might they say you have for growth?
genoc	EXPECTATIONS potential difficulties do you foresee in being part of The Rwanda School Project (e.g. cide, Christianity, Islam, language, Africa, lack of convenience in daily living, third (e.g. cide)? Every experience has some difficult aspects, so please respond.
2. How d	oes your faith or moral code affect your daily life and your decision to volunteer?
3. Do you	have any special needs or health concerns (physical, mental, emotional)?
	describe briefly your decision to apply to The Rwanda School Project and how such an tunity is related to you aspirations for the future.
	OPTIONAL INFORMATION:
class Luthe organ	wanda School Project welcomes applicants of any ethnicity, race, religion, age, economic or sexual orientation. However, since the Project works closely with the Evangelical ran Church of America and the Lutheran World Federation, it is helpful to these izations to know when Lutherans are participating. If you are Lutheran, please indicate synod and church home (name/address/phone/email).

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☐ Expeditionary (E☐ Teacher / Profess ☐ Pastor / Spiritual ☐ Friend ☐ RSP website ☐ Other: ☐ Please list 3 people as y must be from a current	sor	r an interview.		
Name	Street, City, State, Zip	Phone	Email	Relationship
Tvanie	otreet, etty, otate, zip	THORE	Linan	Relationship
To the best of my knoaccurate.	owledge, the information provided	in this applic	ation is com	plete and
Signature		Date		
Please submit your appli	cation to info@rwandaschoolproject	org or the ado	lress on the fi	rst page.
	to volunteer with The Rwanda Schoroject.org. If you decide to withdra	•		-

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NOTE TO VOLUNTEER: Please provide your reference with a self-addressed, stamped envelope and fill out the top portion of this form for them. Appropriate references are work supervisors, teachers, professors, or volunteer supervisors. One reference may be from a family friend. Please do not submit references from family members or co-workers.

Full name	Phone	
Length of time you hope to volunteer:		
1	volunteer with The Rwanda School Project in ease evaluate the candidate's suitability for this work to t	he
How long and in what capacity have yo	u known this person?	

Please rate the candidate's ability in the following area, with 1 = excellent, 2 = good, 3 = fair, 4 = limited, or 5 = poor. Please indicate "unknown" if you're not sure.

	1	2	3	4	5	unknown
Ability to deal with unforeseen situations						
Ability to handle an environment where people speak						
a foreign language where s/he doesn't understand						
Ability to relate to people with different customs and						
opinions from what s/he may accept as "normal"						
Flexibility in changing routines						
Ability to live in community with others						
Ability to work without direct supervision						
Ease in meeting people						
Ability to live without all the comforts of home						
Sense of humor						
Expertise in field						
Ability to confront and discuss problems straightforwardly						
Diplomatic skills in dealing with misunderstandings						

See next page.

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1.	1. Describe the applicant's strengths. In what areas do	es the applicant have room for growth?				
2. For what type of work is the applicant best suited—teaching, office work, building, tutori coaching, library work, other Why?						
3.	3. Please comment on any other aspects of this applica	nt that might be relevant.				
4.	 4. At what level would you recommend this applicant to Project? Weak, should be discouraged Good better than many Very good, no reservation at all 	For acceptance by The Rwanda School				
Sig	Signed	Date				
Pri	Print Name: Tit	le:				
Or	Organization: En	nail:				
Ad	Address: Wo	ork phone:				

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