



Staff no. <i>(filled in by HQ)</i>		<u>Passport</u> <u>photo</u>
FULL NAME		

Personal details

Please print accurately (bitte in deutlichen Druckbuchstaben)

	<input type="checkbox"/> Ms <input type="checkbox"/> Mr	(Academic) title	
First name			
Surname for correspondence		Complete surname for office affairs	
Religion			
Date of birth		Maiden name	
Place of birth			
Country of birth		Nationality	
Zip code		City	
Street and number			
Fathers name	(relevant in Muslim countries)		

Contact details

Please provide details with priority to guarantee best availability

Private phone		
Mobile phone		
Private fax		
Private email		
Private pager/scall		
Office phone		
Office fax		
Office email		
Any other communication means		
Please specify best hours of contact		
Minimum lead time in case of operation		
I am <u>not</u> available for this area / country:		

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Medical information

Are there any chronic diseases?	<input type="checkbox"/> Yes	<input type="checkbox"/> NO
If yes, please provide details		
Do you have to take regular medication?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If yes, please provide details		

Employment

Please provide contact details of company and contact person at company.
IMPORTANT: If you are not employed or freelance, please provide contact details of referee.

Employer			
Contact person			
Department			
Street and number			
Zip code		City	
Phone number (with extension)		Fax number	
Email address			
Your current occupation/position			

Qualifications and experience

	Position	Date (mm/yy to mm/yy)	Place / company
Professional experience			
Relevant vocational training/ education			

International experience

Experience in international operations	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Please specify	Duration (mm/yy to mm/yy)	Country and project	Performed tasks

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Language skills

Language skills	Language	Level of language			
	1.		Reading, listening: <input type="checkbox"/> basic <input type="checkbox"/> advanced <input type="checkbox"/> business fluent <input type="checkbox"/> native speaker	Writing, speaking: <input type="checkbox"/> basic <input type="checkbox"/> advanced <input type="checkbox"/> business fluent <input type="checkbox"/> native speaker	
2.		Reading, listening: <input type="checkbox"/> basic <input type="checkbox"/> advanced <input type="checkbox"/> business fluent <input type="checkbox"/> native speaker	Writing, speaking: <input type="checkbox"/> basic <input type="checkbox"/> advanced <input type="checkbox"/> business fluent <input type="checkbox"/> native speaker		
3.		Reading, listening: <input type="checkbox"/> basic <input type="checkbox"/> advanced <input type="checkbox"/> business fluent <input type="checkbox"/> native speaker	Writing, speaking: <input type="checkbox"/> basic <input type="checkbox"/> advanced <input type="checkbox"/> business fluent <input type="checkbox"/> native speaker		
4.		Reading, listening: <input type="checkbox"/> basic <input type="checkbox"/> advanced <input type="checkbox"/> business fluent <input type="checkbox"/> native speaker	Writing, speaking: <input type="checkbox"/> basic <input type="checkbox"/> advanced <input type="checkbox"/> business fluent <input type="checkbox"/> native speaker		

Johanniter membership

Johanniter member already?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Date of entry	
Identity number				
Your local association				
Which capacity/position do you perform?				
Training and additional qualifications?				
Member of other NGO?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		
If yes, please specify				
What kind of Johanniter training / courses for international operations have you received?	Date	Institution	Kind of training	

Driving licence

Driving licence national	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Please provide vehicle classes
International driving licence	<input type="checkbox"/> YES	<input type="checkbox"/> NO	valid through

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Space for other relevant information

For further information please contact the coordinator volunteers (see footer).

Confirmation:

I enclose the following documents together with my application form:

- ✓ Motivation letter in English
- ✓ Recent CV in English
- ✓ Relevant certificates and documents about your qualification and experience
- ✓ Contact details of two referees we can contact

Place, Date

Full name of applicant

Signature

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Confirmation:

I am able to establish operational readiness for international disaster response operations and would like to become a member of the emergency teams. I am willing to receive further training and to participate in exercises.

My personal data are accurate and up to date.

I am aware that I have to provide changes immediately by email, fax or letter in order to guarantee my operational readiness.

Place, Date Full name of applicant Signature

I am aware of and I agree specifically to the fact that my personal data and all information regarding my volunteering activities with Johanniter International Assistance will be registered in the volunteer staff data base of Johanniter (Helferdatenbank).

Place, Date Full name of applicant Signature

PLEASE NOTE:

Application form must be filled in completely, signed in original and submitted together with all required documents.

Uncompleted applications cannot be accepted.

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