



All Kids Can Learn International

"Villages of Hope"

224 N. Washington Street
Havre de Grace, MD 21078
(800) 785-1015 Fax: (410) 939-6252
web: www.akcli.org email: villagesofhope@gmail.com

Volunteer Application

General Information

Full Name _____

Place of Birth _____ Date of Birth ___/___/___ Gender ___

Address _____

Home Phone _____ Cell or Work phone _____

E-mail _____

Marital status _____

Passport number _____ Expiration ___/___/___

Are you a U.S. citizen? _____ If no, list citizenship _____

Church Membership

Name of church _____

member _____ attend regularly _____ attend sometimes _____

Pastor's Name _____

Ministries in which you serve:

Education & Work

High School _____ Year graduated _____

College/University _____ Year graduated _____

Degree/Concentration _____

Employment Status: full-time ____ part-time ____ retired ____ student ____

Employer _____ Position _____

Work experience _____

Interests/Skills

Available dates for service at the Village of Hope (not necessary if coming with a team)

Desired length of service (not necessary if coming with a team) _____

Have you been on other mission trips? If so, list dates, destination, duration, purpose...

Do you speak any language other than English? _____ What? _____

Have you taken any First Aid training? _____

What course _____ When? _____

Specify skills and interests you have and would be willing to use and share.

_____ Teaching	_____ Bible Study	_____ Music
_____ Medical	_____ Construction/Maintenance	
_____ Cooking	_____ Child Care	_____ Sports
_____ Trade Training	_____ Arts/Crafts	_____ Bookkeeping
_____ Business Skills	_____ Marketing	_____ Administration

Other: (Please list any you have) _____

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For those interested in helping in our School of Hope:

Our School of Hope is a learning environment where students, teachers, families, and volunteers work together. In order to respect the children and the work taking place, we ask that anyone wanting to be actively involved in the school while at the Village of Hope complete the following section. Once you have returned your form, you will be contacted by a member of the School of Hope Leadership Team.

Area of participation: (Circle all that apply)

Health education

Music education

Religious education

Teacher training

Curriculum building

Reading

Child Care

Construction

Writing

Visual Arts

Consultation

Math

Physical Education

Other: _____

Describe in more detail your ideas for participation:
