



Little Flower Volunteer Application

Name _____ Date _____

Phone number _____ Date of Birth _____

Address _____

Email address _____

Length of volunteer commitment _____

Expected start date of volunteer commitment _____

Ending date of volunteer commitment _____

I am (check one):

- Currently living in the Beijing area
- Planning to visit China and hope to volunteer while I am there; I will arrange all my own housing and transportation
- Considering a long term volunteer commitment and interested in living on-site

● Do you speak Chinese? If so, what is your fluency level? _____

● How did you hear about us? _____

● Please briefly describe your previous volunteer experiences (name of organization, activities you participated in, duration of commitment, etc.)

● What type of volunteer work are you willing/ able to do? (please check all that apply)

- | | |
|-------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Admin/ Record keeping | <input type="checkbox"/> Working with school age children |
| <input type="checkbox"/> Cleaning/ Housekeeping | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Warehouse | <input type="checkbox"/> Teaching English |
| <input type="checkbox"/> Community Outreach (working with visitors and volunteers) | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Working with infants (requires a minimum commitment of 6 months) | <input type="checkbox"/> Other: _____ |

● Do you have any special training or skills you feel would benefit Little Flower? Please explain:



- How many hours can you commit each week? (Please give a rough schedule of when you are available to work –including time of day, how many hours per day, and which days per week?)

- Are your immunizations all current? _____

- Date of last Hepatitis B immunization _____

- Do you have any allergies? _____

- Are there any medical conditions that could affect your work? (If so, please give details)

- Have you ever been convicted of a criminal offense and/ or child abuse or neglect? Yes No
If yes, please explain: _____

- Name and contact information of TWO emergency contacts:

1. Name: _____ Relationship to you: _____
Phone Number/ Email: _____

2. Name: _____ Relationship to you: _____
Phone Number/ Email: _____

- Please provide the name and contact information for a reference check:

Name: _____ Relationship to you: _____
Phone Number/ Email: _____

We require all volunteers to provide a copy of their passport for our records and to participate in an orientation before starting a volunteer position at Little Flower.

Please send the completed application form to dewdrops@chinalittleflower.org

Thank you!

Office Use Only:

- | | |
|------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Tour of Little Flower | <input type="checkbox"/> Interview |
| <input type="checkbox"/> Reference Check | <input type="checkbox"/> Position Offered: Yes No |
| <input type="checkbox"/> Orientation | <input type="checkbox"/> Start Date: _____ |