

Postal Address P.O. Box 51418 Musgrave 4062 Tel: +27 31 201 2059 Fax: +27 (0) 86 511 0032

Cell: +27 (0) 82 868 3000

Email: admin@childlinesa.org.za

NPO 035-472

www.childlinesa.org.za

VOLUNTEER COUNSELLOR APPLICATION FORM FOR

CHILDLINE SOUTH AFRICA NATIONAL OFFICE

ONLINE COUNSELLING PROJECT

- * Please note volunteers will be asked to make a minimum of a 9 month commitment to volunteering for the project during which time a volunteer will be asked to complete a minimum of one, four hour shift per week or four shifts per month, With the exception of volunteers who are employed full time, who will be asked to complete a minimum of two shifts per month. Shifts are from 2-6pm, Monday to Friday
- ** Volunteers for the Childline National Office Online Counselling Project are strictly Durban based
- *** MINIMUM QUALIFICATION REQUIRED FOR THIS POSITION
- Grade 12
- Diploma or studying towards a qualification in Social Sciences e.g. Social Work, Psychology, Education, Child and Youth Care work or equivalent.
- Fluency in written and spoken English
- Own transportation is required to and from shifts



Childline South Aprica 20000 55 555

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Name and Surname:	
Residential Address:	
	Code:
Tel (home):	Tel (work):
Cell:	E-mail:
	Age:
ID Number:	(for the purpose of criminal record check)
Do you have any dependants? If yes p	lease give age(s):
Person to contact in an event of emerg	gency:
Tel (home):	Tel (work):



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Where did you hear about Childline?
> What do you know about Childline?
> Do you know any existing counsellors at Childline? If yes, what is his or her name?
➤ What is your motivation for wanting to become a Childline volunteer counsellor?
➤ What are your expectations of Childline?
Do you like children? Please explain why.



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Do you relate better with the pre-teens children or adolescents? Please explain why.
What is your attitude towards and understanding of cell phone online instant messaging? E.g
WhatsApp/BBM/Imo/WeChat
What is your attitude towards and understanding of social interactive online community forums
i.e. Facebook, Twitter, YouTube.
Have you been employed by or assisted any other charitable or welfare organisation? If yes,
please give details and contact person and number.
Do you have any avantioned in accompalities and wanting with shildness 2 ferror along the details
Do you have any experience in counselling and working with children? If yes, please give details.



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Have you had any training or experience working on a computer? Please explain. ———————————————————————————————————
What is your current occupation and how will you fit volunteering in?
If unemployed, how often would you be able to volunteer for us? Please bear in mind that volunteering only takes place between Monday-Friday, 2pm-6pm.
Are you available for training during office hours? Volunteers must be able to participate in a 5 day training course, which runs from Monday-Friday,8am-4pm
> Do you think regulations and procedures are important? Why?



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Do you believe in being assessed by a supervisor? Give reasons?
What do you think is the importance of teamwork?
➤ If Childline could grant you one wish – to be used for the benefit of children only – what would this wish be?
➤ Is there any other information that you feel we should know?
Thank you for completing this questionnaire, we would like to reassure you that all information entrusted to Childline is kept confidential at all times.
Signed By
Date

Once complete, please return this form along with a copy of your Curriculum Vitae and ID Copy, to research@childlinesa.org.za or fax it to 086 511 0032