

**Questionnaire for the placement of volunteers**

# 1.) General information

Name:

Telefone:

E-Mail:

Address:

Which skills/knowledge/qualifications/hobbies do you have?

Which languages do you speak?

# 2.) Information for the mediation commitment

Why would you like to volunteer?

Have you ever done any volunteer work? - If yes, where?



In what form would you like to get involved?

* alone ☐ in a team
* with groups ☐ with individual people

How much responsibility do you want to take?

* little ☐ medium ☐ much

In which area would you like to get involved? (Fields of action)

|  |  |  |
| --- | --- | --- |
| * output/sale | * refugee aid | * mentorships and mentoring |
| * handicraft/repair/handwork | * design free time | * care |
| * consulting | * garden, house, and yard | * sports |
| * errands/shopping | * civil protection | * translation and interpretation |
| * visit/accompaniment | * art, music, dance | * association and community work |
| * participation/co-determination | * events | * read aloud |
| * office/administration | * tutoring/language | * lectures/guided tours |
| * computer/digital | * nature conservation and animals | * others: |
| * driving services | * public relations |  |
| Multiple answers are possible. |  |  |

For whom do you want to be active? (Target groups)

|  |  |  |
| --- | --- | --- |
| * adults | * sick people | * victims of crime |
| * families | * migrants | * seniors |
| * women | * neighborhood | * dying people |
| * refugees | * LGBTQ | * other: |
| * youth | * men |  |
| * children | * people with disabilities | |
| Multiple answers are possible. | | |



# 3.) Time frame

From when would you like to get involved?

* + immediately ☐ from

How many hours per week do you plan to commit?

hours per month

hours per week

For how long would you like to commit?

* + short term ☐ long term

How often and on which days of the week would you like to be involved?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Mo | Tu | We | Th | Fr | Sa | Su |
| mornings | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| afternoons | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| evenings | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

# 4.) Place of engagement

Where would you like to get involved?

* + Spandau ☐ Specific district:

Do you need barrier-free access?

* + No ☐ Yes, I need:

Do you have a driving license?

* + No ☐ Yes, I have a driving license for the following class:



**Consent to the storage and**

**processing of personal data**

In accordance with Art. 6 (1) No. 1a of the German Data Protection Regulation (DSGVO), I consent to the storage and processing of the required personal data for the purpose of volunteering. I can revoke this consent for the future at any time in accordance with Art. 7 (3) DSGVO.

I acknowledge that the following data will be entered into the database of the Spandau Volunteer Agency for easier processing. This concerns personal data recorded during the consultation, such as:

- Last name, first name

- Address, telephone numbers, and e-mail, if given

- Date of birth, if given

- Information on the volunteer position sought, if given

This data is used exclusively by the Spandau Volunteer Agency for the purpose of counseling and placement in a voluntary commitment.

At the latest 12 months after the consultation has taken place, my data will be deleted unless there are legal reasons for keeping it.

My data will only be transferred to third parties if there is a legal basis for this.

I can exercise my rights under Art. 15 (information), Art. 16 (correction), Art. 17 (deletion) and Art. 18 (restriction) DSGVO at any time vis-à-vis the above-mentioned institution (stamp). I also have the right to lodge a complaint with the supervisory authority.

The data protection officer can be reached at datenschutz@unionhilfswerk.de.

Place, Date Signature interested party

I would like to be added to the e-mail distribution list to receive current information for volunteers from the Spandau Volunteer Agency.

Removal from this e-mail distribution list is possible at any time.

Place, Date Signature interested party

Note: A copy of this consent must be given to the signatory.

This document contains the required information according to Art. 13 DSGVO