



Volunteer Programme

Application Form

Please complete this application in full and return it to CTSC reception

Contact information

Full name and surname: _____ Preferred name: _____

Identification No. : _____ Gender: Male Female
(Minimum accepted age is 16 year)

Address: _____

Cell number: _____
(State person if not yours)

WhatsApp number: _____
(State person if not yours)

Email: _____

Name of emergency contact person _____ Relationship: _____

Emergency contact numbers: _____

General Information

Are you currently studying? _____

If YES, what course and where: _____

If NO, state highest class passed, name of school and year: _____

Subjects studied: _____

How did you learn about the CTSC: _____

Have you ever volunteered before: _____ If YES, where _____

And what were your duties? _____

Do you have any scientific background? Please explain _____

Do you have any special skills or hobbies? _____

Why do you think you deserve to be involved in this programme? _____

Programmes

Please indicate which programme you would like to get involved with: Scheduled volunteer Special volunteer

Please note:

Volunteers do not receive salaries. Different levels are assigned to volunteers which reflect on their responsibility. Consisting of facilitating the exhibition floor, school group tours, Gyroscope, Camera Obscura and more.

• **Scheduled Volunteers** – receive a travel stipend per day. Scheduled volunteers only work on a need basis. Responsibilities include; facilitating the exhibition floor, school groups tours, Gyroscope, Camera Obscura and more. **Must be at least 16 years of age.**

• **Special Volunteers** – Contribute to the mission of the CTSC, by donating your services in these following areas; Administration, Marketing, Exhibit maintenance, Education & Special events/projects, I.T.

Please specify your availability for training

January March June Sept December

Note: The scheduled times will be confirmed with you closer to the time telephonically

Availability

Please note that these are CTSC **DAY** shifts: (Mondays - Saturdays 08:00 - 17:00 | Sundays & Public Holidays 09:00 - 16:30)
Please tick the days that **YOU** are available to work:

School Term: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

School Holidays: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Other: _____

References

Please list one personal or professional reference:

Name: _____ Relationship: _____

Contact number: _____

Applicant Signature: _____ Guardian Signature: _____

(if you are under 18 years)

Date: _____

Return either by email or fax, and please include your Curriculum Vitae (C.V)

Email: umr@ctsc.org.za and Carbon Copy (cc) jameyb@ctsc.org.za and info@ctsc.org.za with the subject line of **APPLICATION FOR VOLUNTEER PROGRAM**

Fax: 086 519 7227

For any enquiries, please contact our offices at (021) 300 3200.