

Picture

Contact Information

Name: _____

Address: _____

City: _____ Country _____ P.O.BOX _____

Phone Number: _____ Email: _____

Preferred form of contact: _____

Identification

Nationality _____

Passport Number _____ CPR Number _____

How did you hear about Alia for Early Intervention?

Why would you like to volunteer with Alia for Early Intervention?

What relevant work, education or training experience do you have?

What languages do you speak fluently?

Specify the volunteer role(s) you're interested in (i.e. programs, committees, in-office, events, etc.)
 ()Swimming activities () Reading with students () Labor work: Painting/Cleaning
 () Assisting in events () Arts and Crafts Activities () Gardening

Availability

Please indicate when you are regularly available to volunteer:

Saturday	AM	PM
Sunday	AM	PM
Monday	AM	PM
Tuesday	AM	PM
Wednesday	AM	PM
Thursday	AM	PM
Saturday	AM	PM

Notes about availability:

Permission and Release

1. I am in no way obligated to perform any volunteer services for Alia for Early Intervention;
2. I understand that I may be required to undergo a Police Background Check and a Vulnerable Sector Screening check, if the position involves working with vulnerable individuals;
3. I acknowledge and accept that this application does not guarantee acceptance to a volunteer role, and that Alia for Early Intervention is under no obligation to accept me as a volunteer, and is not obliged to provide a reason;
4. I give permission to Alia for Early Intervention to share any information that I've given them, pertinent to my application to volunteer, with appropriate staff and volunteers.
5. If I am under 18 years of age at the time of my application, my parent/guardian will complete a consent form on my behalf.

Thank you for your interest in volunteering with Alia for Early Intervention. We recognize that Alia for Early Intervention could not survive without volunteer support. We do our best to place all volunteers who apply. Please note: applications may take 5-10 business days to receive and process and our screening process may take 2-4 weeks to complete. Your patience is appreciated.

Applications can be submitted by email to autism@batelco.com.bh or in person at the A.E.I. Office: Building 5 Road 1111 Block 611 Kingdom of Bahrain 8 a.m. and 2 p.m., Sunday to Thursday .

Signature: _____ **Date:** _____

Parent/Guardian Signature (if under 18 years): _____ **Date:** _____

If you are completing this application electronically, and do not have an electronic signature, please click here to agree with the terms and conditions of the form.

For more information, please contact autism@batelco.com.bh, or call (973) 17 730960.