**SPEC Retreat Centre**

**Year of Service**

**Volunteer Missionary Application Form [Deadline 1 May 2019]**

**Applicants must either hold citizenship of a European country or be eligible for a Tier 5 Youth Mobility Visa (Australia, New Zealand, Canada)**

There are **ten** sections to this application form, all of which must be completed. The completed form can either be:

**Emailed** to: specmissionyear@rcdow.org.uk OR

**Posted** to: SPEC Retreat Centre, Waxwell House, 125 Waxwell Lane, Pinner, London, HA5 3EP, UK

**1 PERSONAL DETAILS**

|  |  |
| --- | --- |
| First name |  |
| Last Name |  |
| Date of Birth |  |
| Daytime telephone |  |
| Mobile/Cellphone |  |
| Email |  |
| Full postal address (including postcode and country) |  |

**2 EDUCATION**

Give details of your experience in education.

|  |  |
| --- | --- |
| Secondary School | Examinations |
|  |  |
| Further Education (post 18) | Examinations |
|  |  |

**3 EMPLOYMENT**

List any work experience you have. Please include part-time jobs and voluntary experience.

|  |  |  |
| --- | --- | --- |
| Dates | Employer | Position |
|  |  |  |

### 4 AVAILABILITY

Our volunteer missionary year runs from the end of August to mid-July.

|  |  |  |  |
| --- | --- | --- | --- |
| When could you start volunteering? |  | For how long would you like to volunteer? |  |

**5 MORE ABOUT YOU (Please write a minimum of 50 words for each answer)**

|  |
| --- |
| Briefly, what do you hope to achieve and gain from this missionary experience at SPEC? ***(minimum 50 words)*** |
| What impact has Jesus Christ had on your day to day life? ***(min. 50 words)*** |
| What does your regular prayer look like? ***(min. 50 words)*** |
| What do you value most about the Catholic faith? ***(min. 50 words)*** |
| What teachings of the Catholic Church do you find most difficult to embrace? ***(min. 50 words)*** |
| What are some things that you would like to learn this year? ***(min. 50 words)*** |
| At this time, what do you most enjoy about life? ***(min. 50 words)*** |
| At this time, what are your greatest struggles in life? ***(min. 50 words)*** |
| What are your strengths and weaknesses, and what effect do you expect these to have this year? ***(min. 50 words)*** |
| How would your friends describe you as a person? ***(min. 50 words)*** |
| How do you spend your spare time? ***(min. 50 words)*** |

|  |
| --- |
| Outline any experience you have had in working with young people and children. Include details of any youth or children’s work qualifications. ***(min. 50 words)*** |
| Please describe any health issues for which you are being treated or taking medication. How do these issues affect your daily life? ***(min. 50 words)*** |

**6 DISABILITY AND HEALTH**

|  |
| --- |
| Do you have any disabilities or health issues which may affect your life at SPEC?Please tell us if:* there are any reasonable adjustments we can make to assist you in your application
* there are any reasonable adjustments we can make to the volunteer missionary role itself to help you carry it out
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|  |

|  |
| --- |
| Where / how did you hear about SPEC? |

**7 SPEC COMMUNITY RULE OF LIFE**

|  |  |
| --- | --- |
|  | As a volunteer missionary I will strive to live in accordance with the SPEC Community Rule of Life.***(Check the box indicating your understanding and agreement****)* |

|  |  |
| --- | --- |
|  | As a volunteer missionary I will commit to abstain from new romantic relationships during my first mission year at SPEC. (***Check the box indicating your understanding and agreement)*** |

Before submitting your application, please make sure that you have taken the time to read the SPEC Community Rule of Life.

**8 REFEREES (no direct family)**

Please provide name and address of a spiritual referee (Parish priest, chaplain, spiritual director etc.):

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Relationship |  |
| Address |  | Email |  |
| Telephone |  |
| Postcode |  |

Please provide name and address of an employer/educational referee:

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Relationship |  |
| Address |  | Email |  |
| Telephone |  |
| Postcode |  |

Please provide name and address of a third referee:

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Relationship |  |
| Address |  | Email |  |
| Telephone |  |
| Postcode |  |

### 9 ANY OTHER INFORMATION

|  |
| --- |
| Please use the space below for any other information that you would like to give in support of your application. |
|  |

**10 DECLARATION**

|  |
| --- |
| I declare that to the best of my knowledge the information I have given is true in every respect. |
| Name |  | Signature |  |
| Date |  |



The SPEC Retreat Centre is part of Westminster Youth Ministry, which is part of the Diocese of Westminster