



## Good Shepherd Volunteers International Welcome Letter

Dear Potential Good Shepherd Volunteer,

Thank you for your interest in GSV International! We look forward to getting to know you better through this application process. As you complete your GSV International application, please keep in mind:

- The **Application Deadline for GSV International is February 1<sup>st</sup>**. After that date, please call the GSV office to inquire about possible openings.
- Please read the **GSV International Handbook**, available at [www.gsvolunteers.org](http://www.gsvolunteers.org) to familiarize yourself with the program and expectations.
- Please keep in mind that GSV International applicants may be invited and required to **attend one of two discernment weekends in the Spring**. For more information and details, please see page six of the International Handbook (available online) or contact the office for details.
- Application **materials can be sent in item by item**, you need not wait to send in a complete application package, as we will keep an application file for you.

Again, thank you for your interest in GSV and for your desire to serve. Contact Mary Helldorfer with any questions at 1.888.668.6GSV ext. 717 or [mary\\_Helldorfer@goodshepherds.org](mailto:mary_Helldorfer@goodshepherds.org)

Peace,

The Good Shepherd Volunteers Staff

## **Good Shepherd Volunteers International Application Form Instructions**

- Many of the questions on the application do not determine acceptance or rejection, but help to determine the appropriate placement with the Good Shepherd Volunteers. Please fill in the application as completely as possible. If a question is not applicable, please write N/A.
- All responses are to be typed or printed in black ink. When necessary, please use additional paper.
- Attach a recent photo to the application. The photo is helpful to us in remembering you. Our interest is not in how you look; we just want to get to know you!
- Send in all your transcripts for graduate and undergraduate work. Do not wait until you have all transcripts before returning the application. Forward each one as soon as possible.
- Have your regular physician complete and return the medical form to the GSV office.
- Section VI. Personal Hopes and Goals, and the Self Reference Form are very important parts of the application. Be clear and specific when sharing your personal aspirations, motivations and objectives.
- The autobiography is also an essential component to the process. Please take your time with it and complete it thoroughly. It provides us with deeper insight into who you are and better prepares us in order to help facilitate your discernment and orientation processes.
- Please provide examples when possible. This permits us to obtain a better understanding of who you are and it produces more substance to your answers.
- One reference form is enclosed with the application. Please make copies and then hand them out to the appropriate people. Please give them to a range of people (ie: supervisors, co-workers, advisors, professors, roommates, parish priests, pastors, etc.) who know you well. One reference must be completed by a former employer. You must complete the waiver section at the top of each form before giving them to your references. They, in turn, are to mail the completed form directly to the GSV office. Encourage them to return the form promptly so that your application is not delayed in being processed.
- No application is processed without receiving a completed application form, photo, college transcripts, medical form, self-reference form and reference forms. Send in each immediately. Do not wait until you have all the materials before sending them.
- Once we receive your application, it is reviewed by our admissions board. If you are accepted after this review and the follow-up interview, the process of our program will continue to move forward with our discernment weekend and orientation.
- Please feel free to call 1-888-668-6GSV, x717, or e-mail [mary\\_helldorfer@goodshepherds.org](mailto:mary_helldorfer@goodshepherds.org) anytime to inquire about your application, or if there are any ways we can help you. For more information about the program visit [www.gsvolunteers.org](http://www.gsvolunteers.org)

We look forward to receiving your application -Thank you for your interest!



**GOOD SHEPHERD VOLUNTEERS  
INTERNATIONAL APPLICATION**

Date: \_\_\_\_\_

Please attach recent photo to help identify you or email digital photos to [gsv@goodshepherds.org](mailto:gsv@goodshepherds.org)

1. General Information

Name \_\_\_\_\_  
Last First Middle Social Security #

Present Address \_\_\_\_\_

\_\_\_\_\_  
City State Zip Phone # here until

Email Address \_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_  
City State Zip Phone #

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Marital Status: Single\_\_\_ Married\_\_\_ Engaged\_\_\_ Divorced\_\_\_ Separated\_\_\_

Emergency contacts:

Name\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

Address\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City State Zip

City State Zip

Phone #\_\_\_\_\_

Phone #\_\_\_\_\_

Relationship\_\_\_\_\_

Relationship\_\_\_\_\_

## II. Family Background

### Parents' Names and Addresses

Mother's Name\_\_\_\_\_ Father's Name\_\_\_\_\_

Address\_\_\_\_\_ Address\_\_\_\_\_

State Zip City

State Zip

Phone #\_\_\_\_\_ Phone #\_\_\_\_\_

Occupation\_\_\_\_\_ Occupation\_\_\_\_\_

Names and Ages of Brothers and Sisters:

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Are there any family, personal or financial obligations that might inhibit you from offering two years of service with GSV internationally? Please explain:

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Please explain briefly your current relationship and level of involvement with your family. What are their feelings about you doing two years of service internationally?

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III. Educational/Occupational Information:

1. Are you(or will you be) certified to teach?\_\_\_\_\_ If yes, what subjects and levels?\_\_\_\_\_

2. Are you(or will you be)certified in the health care field?\_\_\_\_\_ If yes, state Degree/Certification and health care area. \_\_\_\_\_

3. List any other developed/certified skills. \_\_\_\_\_

4. Beginning with the most recent, list all schools you have attended. Include vocational and trade schools, etc.

Name of School	Address	Dates		Major/ Minor	Degree/ Certification
		Attended	Minor		

5. Have you served in the military?\_\_\_\_\_ If yes, state branch, rank/position, and dates of service. \_\_\_\_\_

6. Have you been enrolled in a seminary, religious community or similar institutions \_\_\_\_\_ If yes, please list name, address, dates attended, and reason for leaving. \_\_\_\_\_

7. How did you hear about GSV originally? \_\_\_*Response* \_\_\_*Connections* \_\_\_Volunteer Fair \_\_\_Campus Ministry \_\_\_Brochure \_\_\_CNVS website \_\_\_Other \_\_\_\_\_

8. Have you applied to any other volunteer organizations? \_\_\_\_\_ If yes, please list the other organizations and your present status with them.

9. Beginning with the most recent, list jobs held.

Employer	Job Description	Dates

10. List organizations/programs in which you have participated or volunteered. Include awards and training you have received.

Organizations/Programs	Your Role	Dates

11. What do you hope to do once you complete a volunteer commitment?

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IV. Experiences, Skills, and Interests:

Proficiency in Spanish is required for GSV International. Please rank your language ability below. Do you have experience with any language besides Spanish? \_\_\_\_\_ If so, what language and what level of ability?

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Spanish Ability:	Understand	Speak	Read	Write
<b>Basic</b>				
<b>Conversational</b>				
<b>Proficient</b>				

1. What computer skills do you have? \_\_\_\_\_

2. Do you play a musical instrument? \_\_\_\_\_ Which one(s)? \_\_\_\_\_

3. List your favorite periodicals. \_\_\_\_\_

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4. What books have you read recently? \_\_\_\_\_

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5. What types of music do you listen to? \_\_\_\_\_

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6. What movies/plays have you enjoyed recently? \_\_\_\_\_

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7. What television shows do you watch? \_\_\_\_\_

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8. What is your favorite travel/vacation destination?

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9. What types of recreational activities/sports do you enjoy? \_\_\_\_\_

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10. List any other experiences, talents, and hobbies that may be useful for your potential placement within GSV.

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V. International Medical Information

Personal Doctor:

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_  
City State Zip

Are there any special medical conditions that might affect your service? (Specify any disabilities, chronic illness, special medications, allergies, restrictions, etc.)

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Do you have an insurance policy that will cover you during your time of service, rather than the one provided while you are with the GSV?

If yes, name of the policy \_\_\_\_\_ Policy # \_\_\_\_\_

Please indicate any counseling or psychotherapy you have received and its impact on your life. Use a separate sheet of paper. Also, please ask your therapist to write a recommendation for you.

Therapist: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address \_\_\_\_\_  
City State Zip

## VI. Personal Hopes and Goals:

The following information is to help determine placement. There are no right or wrong answers. Your answers should be about a paragraph long for each question. Please answer on a separate sheet of paper.

- a) Explain your motivations and expectations for becoming a member of Good Shepherd Volunteers, internationally. Where did the idea of volunteering abroad originate?
- b) Serving the poor is central to the GSV. What is your understanding of the needs of the poor? What are your expectations regarding service?
- c) What is your understanding of social justice and in what ways have you participated with this issue?
- d) Have you interacted with people of different cultures, belief systems, social classes, ages? In what capacity? What was that experience like for you?
- e) Good Shepherd Volunteers live in intentional communities sharing spirituality, support, meals, and social times. Describe what you envision an intentional community would look like. How do you see yourself fitting into this community living situation? What personal characteristics would you bring to the community? What are your hopes and expectations in regard to this?
- f) Describe your current or past living situations and the roles you played in them in sharing responsibilities and developing relationships.
- g) How do you feel about having a limited budget, sharing resources, and living simply – similar to the way the people of the country live? Have you had any experience living simply? What are your thoughts on this topic?
- h) Spiritual development is an integral part of GSV. How do you attend to your personal spiritual life? Describe some of the ways you take responsibility for your spiritual growth.
- i) How do you cope with daily stress in your life? How do you cope with more large-scale, intense stressful situations? How do you handle conflict? Please provide examples.

j) Please describe a volunteer or service experience. What was it like? What do you feel you accomplished, both for yourself and for those with whom you were working? Have you worked in unstructured environments? How did this impact your work style, your communication style or your personality?

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How do you envision using your skills in Latin America? What type of work environment do you believe that you are best suited for?

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Beginning in August 2006, GSV International will only have placement openings in Lima, Peru. As a GSV-I, you would be serving in Lima, Peru. In a general manner, please briefly describe what you know about Peru.

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What do you foresee as potential cultural obstacles in this country? What personal characteristics would allow you to facilitate your tranquil transition and success as an international volunteer?

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Our international volunteers work directly with the Sisters of the Good Shepherd in their social work ministries. What are your expectations regarding working with Catholic Sisters in Latin America? What is your understanding of the Catholic Church in Latin America? What do you foresee as benefits and/or challenges of this?

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What do you recognize as some of the most evident differences between the USA and Latin America? Please be brief.

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**References:** Please list below the names, addresses and telephone numbers of the five people who know you well and are able to judge your general character, motivation and qualifications for becoming a member of the GSV. Include employers, educators, a minister or a religious, co-workers and friends.

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City State Zip

Email Address: \_\_\_\_\_

Relationship \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email Address: \_\_\_\_\_

City State Zip

Relationship \_\_\_\_\_

3. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email Address: \_\_\_\_\_

City State Zip

Relationship \_\_\_\_\_

4. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City State Zip

Email Address: \_\_\_\_\_

Relationship \_\_\_\_\_

5. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City State Zip

Email Address: \_\_\_\_\_

Relationship \_\_\_\_\_

Your application with the Good Shepherd Volunteers cannot be processed until your college transcripts, references, and medical form are received. Do not wait until you have all of them, however. Send what you do have immediately.

Dependent upon application statues, strong candidates will be invited and required to attend a Discernment Weekend in the Spring. This includes one-on-one interview time, psychological assessment and the opportunity to learn more about GSV International.

Please note that the final stage of the application process will be attending a three-week cross-cultural training. This program really gets into the crux of what it is like to participate in an international experience. If, after this retreat, you are feeling that you do not want to go abroad, you are asked to please tell us; it is okay to change your mind! Along these same lines, if after this training it does not seem to be appropriate for you to volunteer abroad for two years, we reserve the right to rescind the application. While we do want volunteers in South America, we will not send them if it is going to be too difficult for both the site and the applicant.

Thank you for your application and interest in the Good Shepherd Volunteers. We look forward to working with you and getting to know you!

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Signature

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Date

Please send all required materials to:

Good Shepherd Volunteers  
337 E. 17<sup>th</sup> Street  
New York, NY 10003  
Phone: 1-212-475-4245, x717  
or: 1-888-668-6GSV, x717  
Fax: 1-212-979-8604  
Email: [gsv@goodshepherds.org](mailto:gsv@goodshepherds.org)

## International Self-Reference Form

*Applicant's Name* \_\_\_\_\_

This self-reference form will help us to know you better as we consider your application and placement with GSV International. When appropriate, site specific examples or scenarios in the answers. Please return this form with your completed application.

What personal strengths and abilities will enable you to function effectively in an international setting?

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Areas for improvement:

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What do you identify as personal limitations, as you anticipate being in an international setting? What will be the most difficult adjustment for you? What supports might be useful to you in your adjustment?

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Participating in an international experience with GSV will encompass the assessment of your readiness and self-awareness of your strengths and limitations. How open are you to this assessment aspect of the program?

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Please circle the number that best describes the applicant in the following areas. Please add any additional comments.

1=Superior 2=Good 3=Average 4=Below Average 5=Poor

Characteristics						Comments
Health, Stamina	1	2	3	4	5	
Appearance	1	2	3	4	5	
Self Confidence	1	2	3	4	5	
Sense of Humor	1	2	3	4	5	
Maturity	1	2	3	4	5	
Ability to get along w/others	1	2	3	4	5	
Emotional Stability	1	2	3	4	5	
Common Sense	1	2	3	4	5	
Dependability	1	2	3	4	5	
Sensitivity to others	1	2	3	4	5	
Tact in dealing w/others	1	2	3	4	5	
Ability to Make Decisions	1	2	3	4	5	
Initiative	1	2	3	4	5	
Flexibility	1	2	3	4	5	
Willingness to accept criticism	1	2	3	4	5	
Ability to relinquish control	1	2	3	4	5	
Creativity	1	2	3	4	5	
Effective use of time	1	2	3	4	5	
Ability to express feelings	1	2	3	4	5	
Ability to work w/others	1	2	3	4	5	
Ability to work alone	1	2	3	4	5	
Ability to accept supervision	1	2	3	4	5	
Leadership ability	1	2	3	4	5	
Ability to work under pressure	1	2	3	4	5	
Desire to live in intentional community	1	2	3	4	5	
Ability to adapt to new, unstructured or ambiguous situations	1	2	3	4	5	
Focus on spiritual development	1	2	3	4	5	

Evaluate your ability to live and work with others. What can you bring to these situations?  
What qualities may help or hinder you?

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For what type of work would you best be suited? What skills do you have for this work?

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Overall, how would you rate yourself?

- very weak, should be discouraged
- might be OK, with some reservations
- recommend, no strong feelings
- good, better than many
- very good, no reservation at all
- exceptional, a really rare find

List three adjectives that best describe you.

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Please make any additional comments that will help us to know you better.

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Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return to:**  
**Mary Helldorfer**  
**Good Shepherd Volunteers**  
**337 East 17<sup>th</sup> Street**  
**New York, NY 10003**  
**212-475-4245, x717**  
**Or: 1-888-668-6GSV, x717**  
**Fax: 212-979-8604**

**Fax: 212.979.8604**  
**International Reference Form**

*Reference's Name* \_\_\_\_\_

*Reference's Email Address* \_\_\_\_\_

*Applicant's Name* \_\_\_\_\_

*To the Applicant:* Please indicate your preference.

**I waive** my right to access to this reference form.

**I do not waive** my right to access to this reference form.

*Applicant's Signature* \_\_\_\_\_

*Date:* \_\_\_\_\_

To the person completing this form:

The goal of Good Shepherd Volunteers International is to be with the people of the country, who are experiencing the social struggles associated with poverty, neglect, homelessness, and joblessness in a developing country. The volunteers live in community with other GSVolunteers and live simply while sharing their faith. The international GSV's are expected to commit to the program for two years. Please help us get to know the applicant by giving candid comments. Feel free to omit any questions that you are not prepared to answer. No applicant will be rejected on the basis of a single reference. Please type or write all responses in black ink. Please return this reference form as soon as possible so that the candidate's application will not be delayed. Thank you for your cooperation.

How long, how well and in what capacity have you known the applicant?

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Please circle the number that best describes the applicant in the following areas. Please add any additional comments.

1=Superior 2=Good 3=Average 4=Below Average 5=Poor

<b>Characteristics</b>						<b>Comments</b>
Health, stamina	1	2	3	4	5	
Appearance	1	2	3	4	5	
Self confidence	1	2	3	4	5	
Sense of humor	1	2	3	4	5	
Maturity	1	2	3	4	5	
Ability to get along w/others	1	2	3	4	5	
Emotional stability	1	2	3	4	5	
Common sense	1	2	3	4	5	
Dependability	1	2	3	4	5	
Sensitivity to others	1	2	3	4	5	
Tact in dealing w/others	1	2	3	4	5	
Ability to make decisions	1	2	3	4	5	
Initiative	1	2	3	4	5	
Flexibility	1	2	3	4	5	
Willingness to accept criticism	1	2	3	4	5	
Ability to relinquish control	1	2	3	4	5	
Creativity	1	2	3	4	5	
Effective use of time	1	2	3	4	5	
Ability to express feelings	1	2	3	4	5	
Ability to work w/others	1	2	3	4	5	
Ability to work alone	1	2	3	4	5	
Ability to accept supervision	1	2	3	4	5	
Leadership ability	1	2	3	4	5	
Ability to work under pressure	1	2	3	4	5	
Desire to live in intentional community	1	2	3	4	5	
Ability to adapt to new, ambiguous or unstructured situations	1	2	3	4	5	
Focus on spiritual development	1	2	3	4	5	

Give a brief, accurate description of the applicant. Please include strengths as well as weaknesses and how they will affect this person's capabilities to serve internationally.

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Areas for improvement:

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Please share your understanding about what has motivated this applicant to volunteer internationally.

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Evaluate the applicant's ability to live and work with others. Can you share any concrete examples? What qualities might help or hinder the applicant?

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Please describe how the applicant's family and friends feel about him/her doing a year of service with GSV.

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For what type of work is the applicant best suited?

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Overall, how would you rate the applicant?

\_\_\_\_\_ very weak, should be discouraged

\_\_\_\_\_ might be OK, with some reservations

\_\_\_\_\_ recommend, no strong feelings

\_\_\_\_\_ good, better than many

\_\_\_\_\_ very good, no reservation at all

\_\_\_\_\_ exceptional, a really rare find

List three adjectives that best describe the applicant.

\_\_\_\_\_

You may use the back page for any additional comments as well.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Please return to:  
**Mary Helldorfer**  
**Good Shepherd Volunteers**  
**337 East 17<sup>th</sup> Street**  
**New York, NY 10003**  
**212-475-4245, x717**  
**Or: 1-888-668-6GSV, x717**  
**Fax: 212-979-8604**

## **Autobiographical Statement:**

The autobiography, an integral part of the accompanying application form, is an attempt to assist you in your discernment process and to prepare for your participation in cross-cultural orientation. We have prepared these questions, which over the years have proved helpful to our participants. The intent of these questions is to assist you to reflect on your experience in a focused way and to recognize and own those persons, places and events that have shaped who you are today. We strongly suggest that you do this over a period of a few days, focusing on one of the six areas per day. Please type a page or two about each area. **Please number pages.**

### Childhood and early School years

Where did you grow up? Describe each of your parents and your relationship with each of them individually. Describe their relationship, occupation, and level of education. Who were other significant persons for you during this part of your life: siblings, friends, etc.? Describe the disciplinary experiences of childhood. How did you like your childhood? Were there any particularly wonderful or difficult moments during these years? Who was God for you? Describe your childhood religious experience. As you think back to childhood days, how do you feel about the way life was then? What were the life issues that emerged from that period? How are they affecting you now?

### Adolescence

How did you like your teen years? Who were the significant people for you then? In what were you interested? What occupation did your parents urge you to follow? Why? Describe your social/sexual awakening. Did you date? Describe the disciplinary experience of adolescence. Describe your adolescent spiritual or religious experience. What were the life issues that emerged from this time? How does this period of your life impact you now?

### Early Adulthood

How would you describe these years of early adulthood? What life issues emerged from this period? Who have been "key" persons in your decision to volunteer internationally? Describe the forms of permanent commitment, which at one time or another have attracted you. For example: did you ever consider marriage, engagement, religious community, priesthood, single life or other forms of a personal permanent commitment? What experiences led you to choose your present commitment?

### Adult life:

How are you currently feeling about your commitment/vocation? What is your present relationship with your community (however you understand community: religious orders, parish, marriage/family, support group, friends, etc)? How would you describe your present living situation? Are you satisfied with it? Who are the important people in your life? How do you relate to members of the opposite sex? Same sex? How would you describe your present working situation? Are you satisfied with it? What significant growth experiences have you had as an adult? Are there life issues that are significant to you at this stage of life?

### Spiritual and Psychological Experience as an Adult:

Who is God for you? How do you pray? What have been some significant moments in your spiritual or religious experience? With whom do you share these moments? Describe the spiritual resources that you utilize in your routine living indicating how frequently you call upon them. Have you ever been in personal counseling and if so, for what length of time, and with what benefit in your life?

### Abuse/Violence/Trauma:

Have you experienced any form of abuse, violence or trauma in your personal life or been exposed to it in any way? How have you dealt with this abuse/violence/trauma? How do you respond to violence-stress of any kind? In what way has the experience affected and/or continues to affect your life?

### Call to Cross-cultural Service:

How would you describe your present call to volunteer ministry? From where does this call to cross-cultural ministry work seem to be coming? How long has it been with you? What steps have you taken thus far to respond to this call? How would you describe your attitudes toward the Church's involvement in social issues? How would you describe your attitude toward issues of peace and justice? If you do go into cross-cultural ministry, how do you foresee that experience affecting your life? How do your parents and siblings react to your plans to pursue cross-cultural ministry?

## Medical Form

To be completed by the applicant. Please type or print clearly.  
Medical History (include dates)

<input type="checkbox"/> Rheumatic Fever	<input type="checkbox"/> Poliomyelitis
<input type="checkbox"/> Heart Disease	<input type="checkbox"/> Hypertension
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Endocrine Disorder
<input type="checkbox"/> Allergies	<input type="checkbox"/> Convulsions
<input type="checkbox"/> Asthma	<input type="checkbox"/> Kidney Disease
<input type="checkbox"/> Psychological Difficulties	<input type="checkbox"/> Vascular Disease
<input type="checkbox"/> Tuberculosis	<input type="checkbox"/> Venereal Disease
<input type="checkbox"/> Epilepsy	<input type="checkbox"/> Speech Problem
<input type="checkbox"/> Hay Fever	<input type="checkbox"/> Other

Do you use crutches, a wheelchair, artificial limb, or hearing aid?  
Please specify \_\_\_\_\_

\_\_\_\_\_

Do you ever modify your activities because of health or disability? Please explain. \_\_\_\_\_

\_\_\_\_\_

Accidents:

Did you ever have any serious accidents? \_\_\_\_\_

Nature of injury: \_\_\_\_\_

Were you hospitalized? \_\_\_\_\_ Dates \_\_\_\_\_ What effects of the accident(s) persist? \_\_\_\_\_

\_\_\_\_\_

Surgical History:

List operations and dates: \_\_\_\_\_

Psychiatric History:

Do you have any history of emotional difficulties? \_\_\_\_\_

Have you ever been under psychiatric care? \_\_\_\_\_

Hospitalized? \_\_\_\_\_ Dates \_\_\_\_\_ Are you currently under psychiatric care? \_\_\_\_\_

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

Personal Doctor

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City	State	Zip
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Are there any special medical conditions that might affect your service? (Specify any disabilities, chronic illness, special medications, allergies, restrictions, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have an insurance policy that will cover you during your time of service, rather than the one provided while you are with the GSV?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If yes, name of the policy \_\_\_\_\_ Policy # \_\_\_\_\_

Please indicate any counseling or psychotherapy you have received and its impact on your life. Use a separate sheet of paper. Also, please ask your therapist to write a recommendation for you.

Therapist: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address \_\_\_\_\_

City	State	Zip
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Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

# Physical Examination Report

To be completed by physician. Please type or print.

Name of Applicant\_\_\_\_\_

Height\_\_\_\_\_ Weight \_\_\_\_\_ Overweight\_\_\_\_\_ Underweight\_\_\_\_\_

Remarks\_\_\_\_\_

General Appearance\_\_\_\_\_

Scars, deformities of body, etc.\_\_\_\_\_

Hearing\_\_\_\_\_ Hearing aid necessary?\_\_\_\_\_

Vision: Right\_\_\_\_\_ Left\_\_\_\_\_ With correction: Right\_\_\_\_\_ Left\_\_\_\_\_

Mouth: Teeth\_\_\_\_\_ Date of last dental examination\_\_\_\_\_

Urinalysis\_\_\_\_\_

DT Booster (within 5 years) Date given\_\_\_\_\_

Tuberculin Skin Test within six months of date of this exam (circle test done)

Tine Test, PPD, Mantoux, Other \_\_\_\_\_

Results\_\_\_\_\_ Date\_\_\_\_\_

Circle any abnormality:

Eyes Ears Nose Throat Sinuses Thyroid Chest Breasts Heart Lungs

Abdomen Lymph Nodes Reflexes Back

Explanatory Remarks:\_\_\_\_\_

\_\_\_\_\_

Any allergies, dietary restrictions?\_\_\_\_\_

Indicate any medications taken including recurrent non-prescriptive:\_\_\_\_\_

\_\_\_\_\_

Any significant past medical problems?\_\_\_\_\_

Disabilities?\_\_\_\_\_

Any present medical problems? \_\_\_\_\_

Disabilities? \_\_\_\_\_

Explain any history of alcohol or drug abuse: \_\_\_\_\_

Mental Health (include history of psychological difficulties, treatment and recommendations.) \_\_\_\_\_

Are there any reasons why this person could not participate in the work of the Good Shepherd Volunteers or would have to modify his/her activities?

Are you the applicant's regular physician? \_\_\_\_\_

For how long? \_\_\_\_\_

Signature \_\_\_\_\_

(Please use name stamp or include RX with your signature).

Address \_\_\_\_\_

City State Zip

Telephone \_\_\_\_\_

E-Mail \_\_\_\_\_

**Please return this form directly to:**

**Good Shepherd Volunteers  
337 E. 17th Street  
New York, NY 10003  
212-475-4245, x780  
Fax 212-979-8604**