

VOLUNTEER
CANDIDATE INFORMATION FORM



Friends in Khajuraho
association

Opportunity(ies) applied for: English teacher Art, painting & drawing teacher Project co-ordinator

Time available for volunteering: from ___/___/_____ to ___/___/_____

PERSONAL INFORMATION

Full name _____ Male Female

Nationality _____ Date of birth _____

Home address _____

City & state _____ Zip code & country _____

Phone no. (tick if you are on WhatsApp) Email address _____ Skype ID _____

CURRENT SITUATION

Employed by (if employed) _____ Phone number _____

Address _____

Brief description of work: _____

EDUCATION

Highest education reached & any degrees or certificates relevant to the volunteer opportunity applied for.

LANGUAGES SPOKEN

Mother tongue(s): _____ Level of English (please tick): Native Fluent Intermediate

Any other language(s) spoken: _____

PREVIOUS VOLUNTEER WORK

Please list all previous volunteer work including brief description of duties and activities, dates of service.)

TRAVEL EXPERIENCE

Have you traveled in India before? Yes No

If yes; how many times: _____ In which year(s): _____ How long in total: _____

Have you ever lived or traveled in a foreign country (other than your home) for more than 3 months? Yes No

If yes; where: _____ For how long: _____

Any 'non-western' countries visited: _____

REASONS FOR VOLUNTEERING

Why do you want to volunteer with us?

How/Where did you hear about us? _____

SPECIFIC EXPERIENCE

Do you have experience in: Teaching English Teaching art Teaching children
Project co-ordination Trainer Tailoring

If so please explain: _____

CRIMINAL DETAILS

Have you ever been convicted of a crime other than a traffic violation? Yes No

If yes, what charge? _____ Date convicted: _____ Where _____

REFERENCES

Please list two references of people who know you well, other than relatives, preferably for whom you have worked in either a paid or volunteer capacity.

	Name	Address	Phone no.	Email	Relationship
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____

EMERGENCY CONTACT

Name	Address	Phone no.	Email	Relationship
_____	_____	_____	_____	_____

OTHER DETAILS

Any physical limitations that might affect your capacity: _____

Hobbies: _____

I hereby declare that the details furnished above are true and correct to the best of my knowledge.

I further declare that if I am selected for this volunteer opportunity I will come to Khajuraho with a **full travel health accident insurance including repatriation.**

Date: _____

Signature of the applicant: _____

Please print, fill in, scan and email this form back to us at friends.in.khajuraho@gmail.com.