

VOLUNTEER APPLICATION FORM

WORK EXPERIENCE

List previous work experience and expertise. _____

VOLUNTEER EXPERIENCE

Have you participated in volunteer work before? _____
If yes, please describe _____

HOBBIES, SKILLS, SPECIAL INTERESTS

MEDICAL

Do you have a medical condition that the coordinator ought to be aware of? _____

SPECIAL REQUESTS

Do you have any special requests or preferences that we need to consider when assigning tasks? e.g. no heavy lifting, working with partner etc. _____

COMMENT