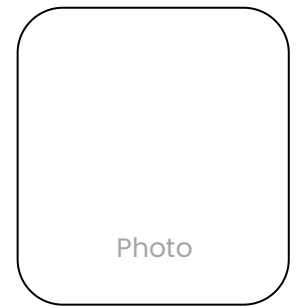


## VOLUNTEER FORM

### **Helping Heart for Relief and Development**

Nayabazar-16, Kathmandu-Nepal



Form No.

#### **Personal Information**

Full Name			
Date of Birth		Gender	
Mobile No.		E-mail ID	
WhatsApp No.		Social Media Handling	
National Id Type		National ID No.	
Marital Status		Hobbies/Interest	
Guardian Name		Guardian Contact No.	
Current Address			
Permanent Address			

#### **Educational Background**

Level of Education		Year of Study	
Field of Study		Institution Contact No.	
Institution Name			
Address of Institution			
Remarks (if any)			

#### **Working Background**

Designation		Year of Experience	
Field of Work		Institution Contact No.	
Institution Name			
Address of Institution			
Remarks (if any)			

#### **Skills and Interests**

Motivation for Volunteering	
Key skills and Expertise	
Key Achievements	
What Skills and Experience are You Looking to Develop?	
Remarks (if any)	

## VOLUNTEER FORM

Why are You Interested in Volunteering with HHN?			
In Which Sector or Field are You Interested in Volunteering?			
Are You a Volunteer of Any Other Organization/Institution?		If Yes, Mention Year of Joining	
Name and Address of Organization/Institution <i>(If joined)</i>			
Tell Us About Your Previous Volunteering Experience.			
How Many Years Would You Like to Volunteer With HHN?			
Health Information <i>(If Any Medical Conditions or Allergies)</i>			
Availability for Volunteering	Weekend <input type="checkbox"/>	1 day a week <input type="checkbox"/>	Flexible Schedule <input type="checkbox"/>
Attached Documents	Citizenship/National ID <input type="checkbox"/>	CV/Resume <input type="checkbox"/>	Academic Certificates <input type="checkbox"/>
Remarks <i>(If Any)</i>			

**Declaration and commitment:** *I am volunteering of my own free will and personal interest. I will not cause any harm or loss to the organization. I will obey the national and international laws and organizational policies & guidelines. If anything occurs before, during, or after the volunteering period, I will be personally responsible for it, and the organization will not be held liable.*

Signature: \_\_\_\_\_

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

**For Official Use:**

Volunteer No.		Volunteer Sector	
Joining Date		Volunteering Period	
Location			
Decision			

Approved by: \_\_\_\_\_

Signature: \_\_\_\_\_

Designation: \_\_\_\_\_

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

