



អង្គការកុមារនៃក្ដីសង្ឃឹមដើម្បីអភិវឌ្ឍន៍

Children with Hope for Development Organization

Address: Po Village, Sambour Commune, Traing District, Takeo Province, Cambodia.

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VOLUNTEER APPLICATION FORM

Name: _____ Nationality: _____

Address: _____

Gender: _____ Age: _____

Arrival Date: _____ Length of Stay: _____

Telephone: _____ Email: _____

Emergency Contact Information: _____

Health Problems: _____

Relevant Skills / Qualifications: _____

Previous Travel Experience: _____

Why would you like to volunteer at the CHD? _____

Do you have any questions for us? _____

How did you hear about the CHD? _____

Certified Passport Copy, Police check and Driver's License from Country of origin attached.

Note: Volunteers must not get-involved in political affairs when performing their duties with CHD. They must not be involved in criminal activities at any time.

I am aware that as a volunteer, I am considered a representative of Children with Hope for Development Organization and that I am subject to the rules and regulations of Children with Hope for Development Organization. I realize my responsibility to respect privacy and maintain confidentiality.

Date:/...../.....

Date:/...../.....

Volunteer's Signature

NGO's Signature

Name: