

## **SOCIETA' COOPERATIVA SOCIALE**

# **Volunteer Application Form**

Name:
Dates you are available to volunteer:
Hours and days, you are available to volunteer within those dates:
Email Address:
Cell Phone / WhatsApp contact number (highlight which applies or both):
Date of Birth:
ID or Driver's License Number - note Country:
Address in Athens (if known):
Permanent address:
Emergency contact and phone number:
Education/Special Training:
Languages Spoken and/or written:

### VOLUNTEER IN THE WORLD SOCIETA' COOPERATIVA SOCIALE

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Previous Volunteer Experience:
Why are you interested in volunteering with Love and Serve Without Boundaries?
List any special interests and talents that you have and feel that you could share with Love and Ser Without Boundaries?
Do you have any health issues or concerns? (If yes, please specify)
Do you have a criminal record or other charges?
Please list two references and their contact information:
1
2
Are you able to bring funds or supplies with you to contribute towards a Love and Serve Without Boundaries' project? (This is not a requirement for volunteering.)
Signature date

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