

# NEK CHAND FOUNDATION

## VOLUNTEER APPLICATION FORM

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Tel \_\_\_\_\_ Email \_\_\_\_\_

Nationality \_\_\_\_\_ Passport No: \_\_\_\_\_

Date of birth \_\_\_\_\_

Education/qualifications \_\_\_\_\_

\_\_\_\_\_

Past occupation \_\_\_\_\_

\_\_\_\_\_

Present/last occupation \_\_\_\_\_

Skills that you can bring to the Rock Garden \_\_\_\_\_

\_\_\_\_\_

Skills that you can bring to the Rock Garden \_\_\_\_\_

\_\_\_\_\_

What benefits do you think you will get from volunteering? \_\_\_\_\_

\_\_\_\_\_

What difficulties do you think you may meet? \_\_\_\_\_

Preferred/expected date of travel \_\_\_\_\_

Occupation reference \_\_\_\_\_

Other reference \_\_\_\_\_

Next of kin \_\_\_\_\_

Next of kin contact \_\_\_\_\_

Address \_\_\_\_\_

Tel \_\_\_\_\_ Email \_\_\_\_\_

Please return this form to NCF, PO BOX 44, WATFORD WD25 8EP UK and send a passport photograph with the application.