

Volunteering

Volunteer application

We welcome your first step towards volunteering for Colorss foundation!

Your name (required)

Last name

Date of birth

Gender

Male Female

Current address

Permanent address

Home phone

Mobile

Email

Skype

Emergency contact

Emergency phone number

What is your preferred mode of communication?

Phone Email

How did you hear about volunteering with the Colorss Foundation?

Family/Friends UN Volunteering Colorss website Others (Please specify)

How would you prefer to volunteer?

In person Online

If you wish to volunteer online, how many hours can you work per week?

5-10 Hours 10-15 hours More than 15 Hours

What time of the day is most convenient for you?

Morning Afternoon Evening Weekend

What time works best for you?

How long do you wish to volunteer for Colorss Foundation

3 months 6 months 12 months over 12 months

Are you currently employed? (If Yes, please answer next question)

Yes No

Employer

Designation

Highest education

Bachelors Masters Ph D

Degree	Major	University	From	To

Level of proficiency in MS Office

Basic Mid Level Advance Can teach others

Previous volunteering experience

Organization	Designation	Summary of responsibility	From	To

Other Information

What other software are you familiar with and what is your proficiency level?

What languages do you know and what is your proficiency level?

Please list a couple of hobbies

Have you ever volunteered for any organisation including Colorss Foundation?

What skills/experience would you like to offer Colorss Foundation?

Please add any other information that may be useful

References

Please supply the names and addresses of two people aged 18 or more who can attest for your qualities e.g. a neighbour, teacher, friend etc. Please note that the referee cannot be someone who is related to you, who lives at the same address as you, or lives at the same address as the other referee.

Reference1

Name

Current address

Phone

Email

Reference2

Name

Current address

Phone

Email