**REGISTRATION FORM**

**ATTACH A PASSPORT SIZE PHOTO**

**FOR VOLUNTEERS**

**Please answer all the following questions:**

|  |  |
| --- | --- |
| **Name:**  | **Last Name:** |
| **ID number:** | **Date of Birth**: |
| **Address (street, number, zip code, country, province)**:  | **Telephone number:*** **Cell phone:**
* **Home:**

**Name and phone number of person of contact:** |
| **Email address:** |
| **Do you work? :**

|  |
| --- |
| **□ Yes (please specify your field of work)****□ No** |

 | **Knowledge of languages (specify level):** |
| **Which Volunteering Program are you interested in?** **□ National Volunteering Program** □ Volunteering at headquarters□ Volunteering in other autonomous communities □ Volunteering in projects nationwide**□ International Volunteering Programs**  |
| **How did you find out about us?** |
| **Education/ Professional experience:**  |
| **Hobbies that are of your interest:** |
| **What are the reasons that motivate you to become a volunteer?**  |
| **Do you have any previous experience as a volunteer? (If yes, indicate the association, place, how long you were there, and your chores?**  |
| **Volunteering formation (if yes, indicate name of the course, name of center that taught the course, subjects taught in class, and year):**  |
| **What activities would you like to participate in throughout this volunteering? What are your expectations?**  |
| **Dates you would like to start:**  |
| **Have you ever suffered or currently suffer from an illness? Do you have any allergies?**  |
| **Time preference to assist a meeting in our office (C/General Arrando, 42 Bajo Izq.)**□ Tuesday from 13h to 14h□ Thursday from 18h to 19h |
| **Observations (you can add comments, ideas, suggestions):**  |
| **Date and signature:**   |

Please send this form to this email address: voluntariado@fcesperanzayalegria.org

**¡¡THANK YOU FOR YOUR INTEREST!!**

**¡¡WE WILL CONTACT YOU AS SOON AS POSSIBLE!!**