



SANKALP

PASTE YOUR RECENT
COLOUR
PHOTOGRAPH
AND SIGN IT.

FORM WITHOUT
PHOTOGRAPH &
SIGNATURE SHALL
NOT BE ACCEPTED.

VOLUNTEER APPLICATION FORM SANKALP EK PRAYAS SOCIETY BHILAI

(Registration No 20810 dated 15.03.2011)

Chattisgarh Society Registrakaran Adhiniyam, 1973

(To be filled-in by anyone who would like to volunteer for SANKALP)

PERSONAL / CONTACT DETAILS:

DATE	
NAME	
ADDRESS	
PHONE 1	
PHONE 2	
EMAIL ADDRESS	
DATE OF BIRTH	
EMERGENCY CONTACT DETAILS:	
NAME:	ADDRESS:-
RELATIONSHIP TO YOU:	
PHONE 1:	PHONE 2:

REFERENCE FROM A PRESENT MEMBER OF SANKALP EK PRAYAS SOCIETY

NAME OF MEMBER	
ADDRESS	
CONTACT NO (RESIDENCE)	
CONTACT NO (MOBILE)	
MEMBERSHIP NO	
DECLARATION: - I KNOW THE APPLICANT SINCE.....AND RECOMMEND HIS/HER CANDIDATURE FOR VOLUNTEERING IN SANKALP.	
SIGNATURE & DATE	

EDUCATION QUALIFICATION

QUALIFICATION	SCHOOL/INSTITUTE NAME	BOARD/ UNIVERSITY	SUBJECT	YEAR OF PASSING	CGPA/ %
SECONDARY SCHOOL					
HIGHER SECONDARY					
GRADUATION					
POST GRADUATION					
OTHERS					

YOU CAN BEST DESCRIBE YOURSELF AS

STUDENT <input type="checkbox"/>	HOUSEWIFE <input type="checkbox"/>	EMPLOYED <input type="checkbox"/>	UNEMPLOYED <input type="checkbox"/>
PART TIME EMPLOYED <input type="checkbox"/>	DOING OWN BUSINESS <input type="checkbox"/>	RETIRED <input type="checkbox"/>	OTHERS <input type="checkbox"/>

• **VOLUNTEER SERVICE INFORMATION:**

“Per Week” for how many hours are you available for SANKALP volunteer assignments? (Minimum 06 Hours excluding commuting time)

.....
 Your availability (Please tick as appropriate) (**Weekdays / Weekends/Both/Varies**)

• **BRIEFLY DESCRIBE WHY YOU WANT TO VOLUNTEER IN SANKALP:**

.....

• **TELL US IN WHICH AREAS YOU ARE INTERESTED IN VOLUNTEERING:-**

Administration Work of SANKALP	Events Organizing for SANKALP	Field Work/Research/Data Collection for SANKALP	Fundraising for SANKALP
Teaching at SANKALP Centres	Creating Awareness of SANKALP	Volunteer/membership Coordination/Drive for SANKALP	Media Relations/Public Relations for SANKALP

• **DO YOU HAVE A SPECIFIC ACHIEVEMENT GOAL THAT YOU PLAN TO ACCOMPLISH THROUGH VOLUNTEER EXPERIENCE IN SANKALP?**

.....

• **BRIEFLY DESCRIBE YOUR HOBBIES & INTERESTS:**

.....

• **ANY SPECIFIC EXPERIENCE, LEARNING AND SKILLS, THAT YOU COULD USE TO SUPPORT SANKALP.**

.....

• **AGREEMENT AND SIGNATURE**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal from SANKALP.

Name of Volunteer -----Signature: ----- Date: - -----

SANKALP appreciates your interest in working with us; we are looking forward to your service for the betterment of SANKALP’s services. However, SANKALP will not be held responsible for anything that happens to you while offering your Volunteer services to it.

Signature of SANKALP Representative-----Signature: ----- Date: - -----

Volunteer ID No -----Date

SANKALP NORMS THAT A VOLUNTEER SHOULD ADHERE TO:

No cash donations may be collected by any volunteer. Volunteers are not permitted to use SANKALP stationery as their own. All SANKALP literature will be developed by SANKALP. Any modifications must have SANKALP’s prior approval. Volunteers may not release any material pertaining to SANKALP, in the media (TV/radio/magazines/newspapers/newsletters etc.), without seeking SANKALP’s prior approval. Volunteers wishing to visit any SANKALP project shall bear all related costs (travel, local travel, boarding and lodging etc). However, in specific case SANKALP may incur the expenses depending upon the merit of the case.

**Kindly post this form to SANKALP EK PRAYAS SOCIETY at:
 SANKALP EK PRAYAS SOCIETY, B-13/ 09, NSPCL Township, Ruabandha, Bhilai, Dist-Durg, Chattisgarh.**