

Please send completed form to UBL Volunteer Liaison Margie Miller: ublvolunteers@ubl.ac.cr

UBL Volunteer Application Form

Personal Data:

4.

Full Name						
	(Please print name as ap	pears on pas	sport)			
Present address						
Stree	t or PO	City		State	Zip Code	Country
Mailing address						
	t or PO			State Zip Code Cou		
Home telephone (<u>)</u>	Work telephone ()	Email_			
Date of Birth//	Sex (MF) Place of	BirthCitizenship			_	
Languages spoken other t	han English:					
1.	F	luent	Conve	rsational	Begir	nner
	г				Begir	
Ζ.	F				_	
Please describe your dutie Do you have any physical	·					
Jolunteer Placement: Please explain any skills yo gardening, teaching, techr					ffice work,	
Skills		-			ent, experier	aced etc.)
			Shereney			
1						
2						
3.						

Are you willing and able to work under the direction of a leader who may come from a different

background or culture? Yes__No__

When are you available for volunteer placement? ______

For how many months are you available to volunteer? _____

Education:

List high schools, colleges, graduate, professional, secretarial, vocational, or other specialized training schools which you have attended.

Name of School	Degree Received	Field of Study

References:

Please list names of employers and individuals below who could provide a reference via email.

Full Name	Occupation	Email Address		
1.				
2.				
3.				

Responsibility of UBL Volunteer:

- All travel expenses are the responsibility of each volunteer.
- Each volunteer provides his/her own health insurance and is responsible for all costs related to health issues.
- Volunteers with UBL are not paid a salary.
- Housing cost, if any, depends on the type and time of volunteer services for each person.
- Available housing is a dorm setting with a shared kitchen facility.

Is this what you understand as a volunteer for UBL?	Yes	No
---	-----	----