LATTITUDE GLOBAL VOLUNTEERING

APPLICATION FORM

Personal details

Your details

First name(s)

Preferred name

Surname

Date of birth ☐☐ ☐☐ ☐☐☐☐ (DD MM YYYY)

Gender: (click the relevant box) ☐ Male

☐ Female

Postal address

Postcode

Phone   Mobile/Cell

Email

Nationality

Skype name

Parent/guardian details (first emergency contact)

Title   First name

Surname

Day phone   A/H phone

Email

Relationship to you

Postal address (if different to the applicant)

Postcode

Alternative emergency contact details

Title   First name

Surname

Day phone   A/H phone

Email

Relationship to you

Education

List your most recent School / College / University

Subjects studied

Additional needs

Do you have any dietary requirements (eg vegetarian) or food allergies?   ☐ No ☐ Yes

Do you have any additional needs (eg due to a disability) that your host may need to be aware of?   ☐ No ☐ Yes

If you answer Yes to either question, a Lattitude staff member will request more information during the selection and matching process to ensure we match you to a suitable placement.

Medical history

Please declare if you have any medical conditions. All applicants will be required to complete a medical screening before departure and Lattitude's Medical Advisor will review this information and advise us if you're fit to travel. It is important to declare any condition (even if you think it is minor) to ensure safety at your placement and confirm that you are fit to travel.

Do you have, or have you ever had, a medical condition or other medical issue that could impact on you while volunteering overseas, or that we should consider in matching you to a placement?   ☐ No ☐ Yes

Do you take medication regularly for health reasons?   ☐ No ☐ Yes

If you answer Yes to either question, a Lattitude staff member will request more information during the selection and matching process to ensure we match you to a suitable placement.

Criminal history

Do you have any criminal convictions or a police record?   ☐ No ☐ Yes

If Yes, a Lattitude staff member will request more information during the selection and matching process.

	Name

Placement year and choices

Please refer to the Application Guide for country choices, placement choices and departure months and list four choices in order of preference.

	COUNTRY	ROLE	DEPARTURE MONTH AND YEAR
1			
2			
3			
4			

About you

Please list any interests or hobbies that may be relevant to your placement choices. Refer to the Application Guide for suggestions.

LIST YOUR INTERESTS AND HOBBIES	EXPLAIN HOW THEY MIGHT BE RELEVANT TO A VOLUNTEERING PLACEMENT

Please list any volunteering experience or involvement in community activities. Refer to the Application Guide for suggestions.

WHAT WAS YOUR ROLE?	WHAT DID YOU DO?

Please list any paid work experience.

WHAT WAS YOUR ROLE?	WHAT DID YOU DO?

Name

About you

Why do you want to volunteer and what would you like to gain from the experience?

Referee details

Lattitude will need to obtain two references from you. Refer to the Application Guide for further information. Your referee should have known you for at least six months in a professional capacity, such as a sports coach, work supervisor or teacher, and cannot be a family friend or relative.

Referee 1

Referee name   Position (in connection to you)

Day phone/mobile   Email

Referee 2

Referee name   Position (in connection to you)

Day phone/mobile   Email

How did you hear about us?

Declaration

I declare that the information provided on this form is complete and correct in every detail, including declaration of medical conditions or regular medication taken. I give permission for my contact details to be given to my fellow volunteers and possibly future volunteers to assist in preparing me for my placement and with Lattitude's administration. I also give permission for the information in this application, and any subsequent information provided, to be shared with prospective hosts and Lattitude staff as required.

Please print out your completed application form and sign it. If you are under 18 years of age this form must also be signed by a parent/guardian.

Applicant signature.. Date   /   /   Parent/guardian signature.. Date   /   /