Form for Volunteers or Interns NGO GRAND CŒUR HEALTH AND INCLUSION

Personal Information
Name and surname:
Date and place of birth:
Nationality:
 Gender: □ Male □ Female
• Phone:
• Email:
Current address:
Professional and Academic Information
☐ Student
☐ Intern
☐ Health professional
☐ Other (specify):
Educational institution or original structure:
Educational institution of original structure.
Field of study or specialization:
Engagement Details
☐ Academic internship
☐ Volunteer work
☐ Occasional support (field actions)
Desired period: From to
Weekly availability:
☐ Full-time ☐ Part-time
Required Documents
 □ Photocopy of identity card or passport
○ □ CV or presentation sheet
○ □ Cover letter
○ ☐ Attestation from the institution (if internship)
(
Date:
Signature:

