

Volunteers work for RHEMN out of their own choice or deployed by other organizations. There will be limited contract with volunteers and will not provide any compensation except under special conditions. They will not be considered as full-time or part-time employees of the organization

RC-95948



# Rural Health Mission Nigeria

## VOLUNTEER APPLICATION

Please Affix 2 Passports

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 State of origin: \_\_\_\_\_ State of residence: \_\_\_\_\_  
 LGA: \_\_\_\_\_ City/Town: \_\_\_\_\_  
 Current Address: \_\_\_\_\_  
 Landmark or location: \_\_\_\_\_

Are you a registered member of RHEMN? Yes  No:  Reg. Number \_\_\_\_\_  
 Why do you want to participate in RHEMN activities? \_\_\_\_\_  
 \_\_\_\_\_  
 What do you currently do in the community? \_\_\_\_\_  
 \_\_\_\_\_ Your profession: \_\_\_\_\_

Area of Interest			
Team	Tick	Team	Tick
Fundraising	<input type="checkbox"/>	Field Volunteer	<input type="checkbox"/>
Training volunteers	<input type="checkbox"/>	Blogging & Social media	<input type="checkbox"/>
Office Administration	<input type="checkbox"/>	Legal Services	<input type="checkbox"/>
When are you available			
Monday - Friday	<input type="checkbox"/>	Weekends only	<input type="checkbox"/>
Always available	<input type="checkbox"/>	On demand	<input type="checkbox"/>

Applicant's Signature/Date: \_\_\_\_\_

**For Official Use Only**

Volunteer Number \_\_\_\_\_ Date Registered: \_\_\_\_\_  
 \_\_\_\_\_  
 Secretary General Admin Officer