

**WILDLIFE SOS**  
**VOLUNTEER APPLICATION FORM**  
FORM NO WSOS/VPA01



1	First Name	
2	Middle Name (if Applicable)	
3	Last Name (Surname)	
4	Date of Birth	Date                      Month                      Year
5	Gender (Please check box)	MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>
6	Nationality (Country issuing Passport)  <i><u>In case of dual citizenship, please mention both countries</u></i>	
7	Present country of residence (Where do you live now)	
8	Email address	
9	Mobile phone number (including international code)	
10	Landline telephone number (including international code)	
11	Occupation	
12	Any relevant educational qualification	
13	Previous experience with wildlife	
14	Previous volunteering experience	
10	Do you have any skills we could use?  <input type="checkbox"/> Art & Design <input type="checkbox"/> Videography <input type="checkbox"/> Photography <input type="checkbox"/> IT <input type="checkbox"/> Gardening <input type="checkbox"/> Carpentry <input type="checkbox"/> Painting & decorating <input type="checkbox"/> Languages <input type="checkbox"/> Woodcarving <input type="checkbox"/> Electrician <input type="checkbox"/> Labour/ Digging <input type="checkbox"/> Writing updates / stories <input type="checkbox"/> Welding <input type="checkbox"/> Masonry <input type="checkbox"/> Fencing <input type="checkbox"/> Plumbing <input type="checkbox"/> Happy to do office work /Gift Shop <input type="checkbox"/> Willing to do anything to help	

	If you have skills that are not listed above please provide details
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### **Volunteering Details**

1	<b>Preferred dates &amp; duration</b> of your proposed volunteering experience with Wildlife SOS	Month _____ Year _____ Length of stay at WSOS _____
2	Day/date of arrival in India if you have already booked your travel	
3	Meal Preference	Vegetarian <input type="checkbox"/> Vegan <input type="checkbox"/>
4	Rooms: <b>**due to Covid19</b> only groups of people travelling together may share a room. Please indicate the number in your group	Number in your group _____ Number of rooms required _____
5	Air Conditioning	Non A/C Room <input type="checkbox"/> I'd prefer an A/C room & am happy to pay an additional cost <input type="checkbox"/>

### **MEDICAL INFORMATION \*\*MUST BE COMPLETED IN FULL FOR YOUR SAFETY\*\***

1	Name & details of two emergency contacts & their relationship to you  ** please include international dialling code for contact numbers  *** please complete all fields in full	<b>Mr/ Mrs/ Ms</b>  Relationship to you  Contact number  Email  Address (inc zip/ post code)    <b>Mr/ Mrs/ Ms</b>  Relationship to you  Contact number  Email  Address (inc zip/ post code)
2	Blood Group	

3	Medical allergies if any <i>(for example – allergic to penicillin/ plasters)</i>	
4	Food allergies if any <i>(for example nuts, sea food)</i>	
5	Existing medical conditions <i>(for example - diabetes, arthritis, asthma)</i>	
6	Regular medication that you are taking <i>(names of drugs / medicines)</i> <i>Pls write them below if there isn't space enough here</i>	
7	If you have any other medical needs, please mention them here so we can make your stay more comfortable.	

**Supporting Documents: please scan and attach (Please check box if attached)**

1	Passport copy	<input type="checkbox"/> Scan attached <input type="checkbox"/> To follow
2	Overseas Medical Insurance copy  <i>** Pls be aware that Travel Insurance policies no longer include cover for Covid19 &amp; respiratory related illnesses**</i>  <i>Our policies regarding your safety &amp; your responsibilities in this regard will be reviewed &amp; updated ongoing in line with government advice</i>	<input type="checkbox"/> Scan attached <input type="checkbox"/> To follow
3	Confirmed flight ticket copy	<input type="checkbox"/> Scan attached <input type="checkbox"/> To follow
4	Recent Photograph	<input type="checkbox"/> Scan attached <input type="checkbox"/> To follow

Please email above documents, with your completed Application Form to [volunteer@wildlifesos.org](mailto:volunteer@wildlifesos.org)  
**If you don't yet have all of the above documentation, please indicate above and then send to us ASAP once your application to volunteer has been confirmed.**

**FOR INDIAN NATIONALS:** Please scan & attach Government approved photo ID (**Voter ID card, Aadhaar Card and PAN Card are all required**). \*PAN not required if age below 14.

Space for Additional Information below ie Medical if required: