

## HOPE Volunteers Inquiry Form

Please attach your CV and letter of interest with this form and send to ;  
[hopefoundation.usoffice@gmail.com](mailto:hopefoundation.usoffice@gmail.com)

Name	
DOB	
Citizenship	
Address	
Phone / Whatsapp	
Email	
Profesion	
Degree	
Academic affiliation	
Expected dates of volunteering trip	
Can you cover your costs through the volunteering period?	
Can you pay or flight, transportation, health	

insurance, and incidental expenses?	
Do you have any restriction for volunteering?	
Can you fundraise to support HOPE Foundation medical activities?	
Do you intend to involve in training existing staff?	
Do you intend to involve in research?	
Additional comments	