

VIDA
Volunteer Application Form

Personal Information:

Last name First name Middle name

Home phone (Area code and/or Cell phone Email
Country code

Home address City State/Province Zip code Country

Passport number Expiration date (DD/MM/YYYY) Issuing country

*If your passport is not issued by the United States, Canada or the European Union, please check for visa requirements at your local consulate.

Trip Information:

Trip code Country(ies) Dates Program (Med/Dent/Vet/Const)

Academic Information (for Students only)

School/Institution Major/Minor Year

Are you receiving Academic credit for this trip? _____ If so, please describe:

Occupational Information:

Occupation Business/Organization

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License Information (for Health Professionals Only):

Specialization	License number	Licensing Organization
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*You'll be asked to send a copy of your diploma, current license, and the photo page of your passport 75 days prior to departure.

Health/Dietary Information:

Dietary restrictions (Check all that Apply):

Vegetarian Vegan Pork Red meat Lactose intolerance

Food Allergies: yes/no:

Medication Allergies: _yes/no: _____

Serious medical conditions: yes/no _____

Emergency Contact Information:

Please provide information of two people who will be available during your trip dates, in case of an emergency.

Name (First & Last)	Relationship to you
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Home/Cell Phone	Work	Email
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Name (First & Last)	Relationship to you
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Home/Cell Phone	Work	Email
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Expectations for your volunteer travel experience:

Additional Travel Plans:

Although we have no objections to students arriving before trip dates or continuing travel after their stay, we do request that they explain their additional travel plans. Students who are interested in continuing a more personalized structured volunteer trip are able to do so with our partners at TropicalAdventures.com.

I have read and agree to the VIDA Volunteer Participation Agreement

Signature

Date