

Hands Across The World

Non-Medical Volunteer Application

This is a mission trip, not a vacation. As a non-medical volunteer, you will be working long hours and be required to stand for long periods of time. This is not a tourist trip.

If you are interested in being a non-medical volunteer for Hands Across the World, please complete the application below no later than:

Please contact Susan McCormack if you have any questions at: mccormacks@email.chop.edu

Personal Information

First Name: _____ Last Name: _____ DOB: _____

Address: _____

Phone Number: _____ Cell _____ Home _____

Email: _____

Occupation: _____

Employer: _____

How did you find out about Hands Across The World? _____

Tell us about yourself:

Why do you want to go on the Hands Across the World Mission?

Medical Information:

HAW requires that all volunteers have the following vaccinations:

Hep A (Series of 2 shots): I have these shots / I will get these shots (Please Circle)

Hep B (Series of 3 shots): I have these shots / I will get these shots (Please Circle)

I am comfortable going to the CDC to get any additional recommended vaccinations: **Yes / No** (Please Circle)

Please list any medical conditions we should be aware of:

Please list any prescribed medications you are taking:

Passport Information:

Note: Your passport MUST be valid for at least 6 months after your return data. Please apply or renew your passport early.

Do you have a passport? Yes / No, but I plan to apply asap / Yes, but I need to renew (Please circle)

If yes,

Name (as it appears on passport) _____ DOB: _____

Passport Number: _____ Issuing Country: _____ Passport Expiration Date: _____

Your Interest and Skills:

Prior Experience with Medical Mission: _____

What languages do you speak fluently? _____

Please check the following that apply to you:

I am comfortable with infants and small children.

I am comfortable in hospitals and/or with patient care.

I am known for having a positive attitude and outlook.

I have good diplomacy skills.

I work well under pressure.

I am computer savvy, and comfortable using Microsoft Excel.

I am a digital photo whiz. I shoot with a: DSLR Point and Shoot

I enjoy creative writing

I am familiar with blogging and/or sharing photos online.

I have press and/or media experience.

I have experience working with electronic and/or mechanical equipment; I can fix things.

I can lift and move heavy boxes (50 lbs.)

I have experience with logistics and transport of supplies/equipment.

I have experience with interpreting/translation. If so, which languages?

Please share any other skills _____

Is there anything we should be aware of? _____

By submitting this application, I confirm that I am interested in going on the Hands Across The World mission. I will get all necessary shots and vaccinations. I have a valid passport or am in the process of applying/renewing.

Please sign: _____ **Date:** _____

Hands Across The World

Medical Volunteer Application

Personal Information

First Name: _____ Last Name: _____ DOB: _____

Address: _____

Phone Number: _____ Cell _____ Home _____

Email: _____

I am applying for a volunteer position as

-Surgeon

-Nurse Circle : Pre/Post Op. Surgical Circulating. PACU. Nurse Anesthetist

-Anesthesiologist

-Other. _____

Documentation Required:

Copy of resume/curriculum vita detailing current experience

Copies of diploma and degrees

Documentation of speciality training/Board Certification

Copy of current license

Current copy of PALS/ACLS certification

Documentation of COVID 19 vaccination and boosters

Medical Information:

HAW requires that all volunteers have the following vaccinations:

COVID 19 vaccination and Booster shots (copy of verification card required with documentation)

Hep A (Series of 2 shots): I have these shots / I will get these shots (Please Circle)

Hep B (Series of 3 shots): I have these shots / I will get these shots (Please Circle)

I am comfortable going to the CDC to get any additional recommended vaccinations: **Yes / No** (Please Circle)

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Please sign: _____ **Date:** _____