PARTNERS FOR URBAN KNOWLEDGE ACTION AND RESEARCH

**Application for Volunteer Service/Internship**

(Please email your completed application to  [hr@pukar.or](mailto:hr@pukar.org)g)

**Contact Information**

Name

Gender

Age

Street address

City/State/ZIP Code

Home phone

Work phone

Email address

**Education**

|  |  |  |
| --- | --- | --- |
| **Degree** | **Educational Institution** | |
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**Skills**

Computer/ Technical skills

272, Municipal Tenements, Shivaji Nagar, BMC Colony, Kher Wadi Road, Bandra (E) Mumbai 400 051

**Phone:** +91 22 6574 8152 **Fax:** +91 22 2647 4872 **Email:** pukar@pukar.org.in **Website:** www.pukar.org.in

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Language skills (Please check only one level for each language)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Language | Beginner | Intermediate | Advanced | Native |
|  |  |  |  |  |
| English |  |  |  |  |
| Hindi |  |  |  |  |
| Kannada |  |  |  |  |
| Marathi |  |  |  |  |

Other skills

**Experience**

Previous volunteer/intern experience

Other relevant experience

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**Availability**

For how long do you intend to work at PUKAR? For how many hours every day?

**Interests**

Why are you interested in volunteering with PUKAR? How do your interests relate to PUKAR's mission and work?

What areas are you interested in working in (please check as many as apply):

 Organizational Development

 Communications & IEC Material Development

 Field work

 Fundraising

 Urban Health

 Research

 Public Relations

 Urban Youth and Knowledge Production

 Urbanism

 Other, please specify:

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**Emergency Contact Information**

Name

Street address

City/State/ZIP Code

Phone

Email address

**Reference 1 (Mandatory)**

Name

Street address

City/State/ZIP Code

Phone

Email address

**Reference 2 (Mandatory)**

Name

Street address

City/State/ZIP Code

Phone

Email address

**Agreement and Signature**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer/intern, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name

Date

**Our Policy**

It is the policy of this organization to provide equal opportunities, without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering/interning with us.

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