



## BHF Uniform Application

### Program of Interest

**Please Check:**       Board Member                       Volunteer  
                                   Cross-Cultural Leadership Prog.       Global Leadership Prog.

### Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Mobile Phone	
E-Mail Address	

### Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Mobile Phone	
E-Mail Address	

### Background and Professional Information

*Please submit copy of resume or CV*

Profession(s)	
Language 1 Skills:	Spoken 1 Level: 1 2 3 4 5 (Fluent) Written: 1 2 3 4 5 (Fluent)
Language 2 Skills:	Spoken 1 Level: 1 2 3 4 5 (Fluent) Written: 1 2 3 4 5 (Fluent)
Language 3 Skills:	Spoken 1 Level: 1 2 3 4 5 (Fluent) Written: 1 2 3 4 5 (Fluent)
Language 4 Skills:	Spoken 1 Level: 1 2 3 4 5 (Fluent) Written: 1 2 3 4 5 (Fluent)

### Current Organization Affiliation

Organization's Name (If student, provide school name) \_\_\_\_\_  
 The Build Haiti Foundation – 9770 Patuxent Woods Drive, Suite 317, Columbia, MD 21046 – Phone (410)205-2444  
[www.TheBuildHaitiFoundation.org](http://www.TheBuildHaitiFoundation.org)



Graduation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Degree Awarded: \_\_\_\_\_

**Interests**

*Tell us which areas in which you are interested. Examples include previous (mission) experience etc., BHF Workgroup such as: Education, Project Management Team, Healthcare, Agriculture/Microfinance, Business Development & Marketing, Administrative, Grant Writing/Proposal Dev., IT /Web Dev., Fundraising.*

**Special Skills or Qualifications**

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

**Travel Information (if applying for GLP or CCLP or plan to travel with BHF)**

Name <i>As it appears on your id, exactly</i>			
Country of Citizenship			
State Issued Id and Number		Birth Date	
City id was issued in		ID Expiration Date	



## 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/board member/intern/program participant, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. BHF reserves the right to perform background check on all its volunteers/board/program participants.*

Name (printed)	
Signature	
Date	

## Application Process

*Once we receive your application, we will contact you either by e-mail or by telephone. If selected, you will need to send the following information and/or documents to our mail office within 2 weeks of notification (address listed below). So please have applicable documents ready:*

1. Current Curriculum Vitae / Resume
2. Current Licensure (if applicable)
3. Current Board Certified (if applicable)
4. Two Letters of Reference

Print Name: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

*Participants who do not adhere to the rules and procedures of the agency or who do not satisfactorily perform their assignments are subject to discipline and/or dismissal. Disciplinary action shall range from verbal warnings to immediate discharge, depending on the seriousness of the offense in the judgement of management. Possible grounds for immediate dismissal may include gross misconduct or insubordination; theft of property or misuse of agency materials; abuse or mistreatment of clients, staff or other members; not abiding by agency policies and procedures; and not satisfactorily performing assigned duties.”*