

ARCHDIOCESE OF ABUJA –HEALTH DEPARTMENT
Catholic Action Committee on HIV/AIDS (CACA)

Block B, Flat 1, Rivers Court, Gaduwa, Estate, Durumi 3, Abuja FCT
Email: caca_abuja@yahoo.com

*Attach two recent
passports photos
with full name
written on the
reverse/back side
of the photos*

Community Volunteers Recruitment Form

1. Full Name
2. Contact Address.....
3. Tel Nos..... Date of Birth
4. Marital status..... Sex
5. Religion..... Tribe.....
6. State of Origin..... LGA.....
7. Occupation, Work or Business.....
8. Nationality
9. Work or Business Address.....
10. Languages Spoken Fluently.....
11. Who is a Volunteer?
12. How long do you want to volunteer?
13. After you have been trained, you will voluntarily step-down your new skills on others?.....
14. How many hours per week can you conveniently sacrifice for CV activities?.....
15. Do you agree not to disclose any VC/Household status
16. Do you agree not to molest or abuse any child or caregiver
17. Are you ready to protect the interest of Vulnerable Children at all time

Attestation:

I,, hereby attest and pledge to be of good character and good ambassador of CACA obey and abide with all rules and regulations, discharge my duties and obligations diligently and effectively at all times as in the **CACA Volunteers job description and also not to disclose any Vulnerable child/ Caregivers status.**

Signature.....Date

Guarantor.

I,, hereby attest that the above name and photograph resides in this community (.....). I pledge he will carry out his duties diligently as in the **CACA Volunteers job description** and abide by rules and regulation of the organization.

Position in the Community

Signature Date