



## Volunteer Application Form

Name

Age

Sex

City

Occupation

Name of your church/ Institution sending you for training:

Email address

Phone Number

1. Have you had any previous experience in training/teaching? If yes, please elaborate.

2. What was the age group of the target audience?

3. Why do you think safety awareness in schools and other learning centres is important?

[www.womenofworth.in](http://www.womenofworth.in)



4. Please provide contact information of one person for reference.

Name and Designation:

Address:

Email:

Phone:

5. Will you commit to doing at least two workshop sessions as assigned by WOW after the training certification?

6. Will you commit to being part of WOW's follow up program to ensure safety on campuses and give us the necessary feedback from your workshop sessions?

7. Have you had any previous counselling experience with children?

8. What do you think is needed in student campuses to ensure children's safety?

Thank you for your time.