



**NAMUTUMBA**  
COMMUNITY HOSPITAL

## Namutumba Community Hospital

Budongo Village  
Namutumba Town Council  
Namutumba District  
Plot 150-155

+256200907161 / +41779234971

[Info@nch.ug](mailto:Info@nch.ug) <https://www.nch.ug>

Please attach a  
current passport-  
size photograph

## VOLUNTEER APPLICATION FORM

Passport Number:	
Expiry Date (DD.MM.YYYY):	

First Name:		Surname:	
Nationality:			
Full Postal Address:			
		Post Code:	
Telephone No:		E-mail:	
Date of Birth:		Gender:	
Anticipated arrival date to Uganda:		Anticipated departure date from Uganda:	

### Contact person in case of emergency:

First Name:		Surname:	
Relationship:			
Full Postal Address:			
		Post Code:	
Telephone No:		E-mail:	



**NAMUTUMBA**  
COMMUNITY HOSPITAL

## Namutumba Community Hospital

Budongo Village  
Namutumba Town Council  
Namutumba District  
Plot 150-155

+256200907161 / +41779234971

[Info@nch.ug](mailto:Info@nch.ug) <https://www.nch.ug>

### Personal Information:

How have you come to know about our Hospital:	
List any allergies or other currently relevant health issues:	
List any special dietary needs that you have:	
Which languages do you speak or read?	
List any skills you have as well as any training that you have had which will be applicable to your volunteer work:	
Which specific volunteer project are you interested in?	
What is your current workplace about?	
Do you have any materials to support NCH, like medicine, teaching aids etc?	



**NAMUTUMBA**  
COMMUNITY HOSPITAL

## Namutumba Community Hospital

Budongo Village  
Namutumba Town Council  
Namutumba District  
Plot 150-155

+256200907161 / +41779234971

[Info@nch.ug](mailto:Info@nch.ug) <https://www.nch.ug>

What skills do you bring with you to NCH?:	
Have you done voluntary work before?	<input type="checkbox"/> Yes / <input type="checkbox"/> No
If yes, please state briefly with which organisation/institution, where, when, how long and what you have done:	
Are you fully insured for Health/Accident/Travel/Repatriation?	<input type="checkbox"/> Yes / <input type="checkbox"/> No
If not currently, you need to be fully insured for Health/Accident/Travel/Repatriation for the time you are in Uganda?	<input type="checkbox"/> Yes / <input type="checkbox"/> No

### Disclaimer for Volunteers:

Namutumba Community Hospital - Uganda makes every endeavour to provide a safe and secure working environment for all volunteers and not to ask any volunteer to perform tasks beyond the competency of the volunteer, or without appropriate training and supervision. However, every volunteer must take care for their own safety and well-being and the safety and well-being of others around them. Volunteers should not undertake tasks for which they do not feel competent, or work in situations at Namutumba Community Hospital - Uganda where they do not believe their own safety is assured.

Do you agree with the Disclaimer for Volunteers?	<input type="checkbox"/> Yes / <input type="checkbox"/> No
--	--

### Namutumba Community Hospital wish for Support:

The NCH- Uganda asks volunteers not to give any means of support to individual NCH workers or community or students directly. Any help a Volunteer wishes to give to the above groups for their support must be channelled through Namutumba Community Hospital- Uganda and be discussed with the Hospital management.

Do you agree with the Namutumba Community Hospital wish request concerning Support?	<input type="checkbox"/> Yes / <input type="checkbox"/> No
If not, give reasons for?	



**NAMUTUMBA**  
COMMUNITY HOSPITAL

**Namutumba Community Hospital**

Budongo Village  
Namutumba Town Council  
Namutumba District  
Plot 150-155

+256200907161 / +41779234971

[Info@nch.ug](mailto:Info@nch.ug) <https://www.nch.ug>

Have you read the Volunteering Guide and taken the online seminary of Brückenwind (german speakers)?  
If not, give reasons for?

--

**Declaration of Truth:**

**I declare that the above information is accurate to the best of my knowledge.**

Applicant's  
Signature:

--

Date:

--

Do you have any other information you want to share with us?

If yes please be free to share with us

.....

.....

==== Office Use Only for Namutumba Community Hospital-Uganda =====

Checked  
form:

Signature:

--

Date:

--