



Complete the form and send it to e-mail: [volunteering@ihrchq.org](mailto:volunteering@ihrchq.org)

## VOLUNTEER APPLICATION FORM

IC 05967023

Paste **Photograph** here

### A- PERSONAL INFORMATION

Full Name *	
Father's Name *	
Age + Date of birth *	
Gender + Marital Status *	
National Identity Card # / Passport or ID Number*	
Nationality*	
Home Address *	
Correspondence Adress	
Phone # (Home) *	
Email address *	
Mobile # *	
Who recommends	



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## B- EDUCATIONAL BACKGROUND & LANGUAGES

i) For each degree please specify the following data: \*

Type of degree	Field of study	Grade obtained	Dates (month/year)	Distinction

ii) Complete the following table for all languages known other than the mother tongue, using only the Number corresponding to the level attained. \*

- 5= fluent, high level of accuracy, near mother-tongue competency;
- 4= very good, ease of usage, few errors;
- 3= good, some difficulty, fair number of errors;
- 2= some knowledge, difficulties, many errors;
- 1= very basic knowledge

Language	Speaking	Writing	Reading	Listening
English				
French				
Italian				
Spanish				
Arabic				
Hindi				
Urdu				
Russian				
German				
Greek				
Polish				



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**C-DATA DOWNLOAD FOR INFORMATION DOWNLOADING DIRECTLY FROM A PERSON**

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.....  
Surname & Given Names

### Consent to the processing of personal data

Pursuant to Article 6.1 of **REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL (EU) 2016/679 of 27 April 2016 on the protection of individuals with regard to the processing of personal data and on the free movement of such data and repealing Directive 95/46 / EC (general data protection regulation)** I, the undersigned, agree to the processing of my personal data regarding my participation in the SMM IHRC volunteer service by the International Human Rights Commission with the seat 118 00 Prague, Loretanské náměstí 109/3, ID 05967023 to update documents, conduct activities and correspondence.

Please be advised that your consent may be revoked at any time by sending an e-mail to the address of our Foundation ([volunteering@ihrchq.org](mailto:volunteering@ihrchq.org) )

.....  
Date, place and signature of the person consenting



According to art. 13 para. 1 of the Regulation of the European Parliament and of the Council (EU) 2016/679 of 27 April 2016 on the protection of individuals with regard to the processing of personal data and on the free movement of such data and repealing Directive 95/46 / EC (hereinafter: GDPR) that:

- 1) The administrator of your personal data is: **INTERNATIONAL HUMAN RIGHTS COMMISSION / UMBRELLA FUND / Loretánské náměstí 109/3, Hradčany, 118 00 Praha 1, Czech Republic IC 05967023** (hereinafter IHRC).
- 2) The Data Protection Officer of the IHRC is Mr Sir Rafal M Wasik, e-mail address: [info@ihrchq.org](mailto:info@ihrchq.org)

I declare that I transfer my personal data for internal processing in the **INTERNATIONAL HUMAN RIGHTS COMMISSION / UMBRELLA FUND / Loretánské náměstí 109/3, Hradčany, 118 00 Praha 1, Czech Republic IC 05967023**



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### D-STATEMENT

**I hereby certify that all the personal data provided in this application are true and correct. The above requested data are collected for purposes relating to the selection of International Human Rights Commission membership ONLY.**

I apply for membership as Volunteer of the International Human Rights Commission – IHRC Umbrella Fund and agree to abide by its Constitution and rules.

I enjoy full public rights;  
I have full legal capacity;  
I do not belong to terrorist organizations;

\_\_\_\_\_

**Hend written signature**

\_\_\_\_\_

**Date**

Paste **Copy Passport or National ID Card** here