



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

Annual membership fee: .....

## PEACE AMBASSADOR'S MEMBERSHIP APPLICATION FORM

Paste **Photograph** here

### A- PERSONAL INFORMATION

Name	
Father's Name	
Age + Date of birth	
Gender + Marital Status	
I.D Card / Passport or DL Number	
Institution	
Institution Address	
Home Address	
Phone # (Institution)	
Phone # (Home)	
Fax # (if available)	
Mobile #	
Website	
Email address	



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

## **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				
Persian				
Other _____				



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

## **C- MOTIVATION**

(Please write clearly. You can use extra sheets if needed)

**1) Why do you want to be a part of the IHRC?**

---

---

---

---

---

---

---

---

**2) What are some of your core values?**

---

---

---

---

---

---

---

---

**3) How are you growing into living in greater alignment with your core values? Are there any places where you feel stuck?**

---

---

---

---

---

---

---

---

**4) What comes to your mind with the words "Development" and "Leadership"?**

---

---

---

---

---

---

---

---



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

5) Do you have any experience as human rights activist/advocate or for peace? (Please explain in detail and use the other paper and enclosed with the form)

---

---

---

---

---

---

6) Why do you want to be part of IHRC and what benefits can IHRC get from you

---

---

---

---

---

---

---

---

---

---

7) What benefits they give us as ambassadors or members

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---



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

---

## DATA DOWNLOAD FOR INFORMATION DOWNLOADING DIRECTLY FROM A PERSON

.....  
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: RODO) 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**



Specialized Inter-governmental Organization  
**International  
Human Rights** Commission  
La Commission Internationale des Droits de L'homme  
Umbrella Fund

<https://www.ihrchq.org>

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

---

**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 Ambassador at Large of the International Human Rights Commission – IHRC Umbrella Fund and agree to abide by its Constitution and rules.

---

**Signature**

---

**Date**