



P.O. Box 51025  
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 www.stoveteam.org  
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*Bringing fuel-efficient stoves to the world*

**Volunteer Application**

**Destination** \_\_\_\_\_  
**Month/Year of Trip** \_\_\_\_\_

|   |                    |   |
|---|--------------------|---|
| Name (as it appears on passport) and Nickname   |                    |   |
| Address (Street, City, State, Zip)  |                    |   |
| Home Phone  | Cell Phone         | Work Phone                                    |
| Email Address   | Present Occupation | Employer                                      |
| Airport Departure City  | Special Diet       | T-Shirt Size (S-XXXL)                         |
| Medical Conditions/Special Needs (Please attach list of medications)  |                    |   |
| Spouse/Partner's Name   |                    | Emergency Contact (Name, Relationship, Phone) |
| Criminal Record (U.S. or Foreign): <input type="checkbox"/> No <input type="checkbox"/> Yes (Provide explanation)   |                    |   |
| Spanish Fluency: <input type="checkbox"/> Native Speaker <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> None   |                    |   |
| Previous Travel Experience:<br><input type="checkbox"/> Africa <input type="checkbox"/> Asia <input type="checkbox"/> Europe <input type="checkbox"/> Latin America <input type="checkbox"/> Middle East <input type="checkbox"/> South Pacific <input type="checkbox"/> Other: |                    |   |
| How were you referred to StoveTeam International?   |                    |   |
| <b>Please use additional paper (if necessary) to answer the following questions.</b>  |                    |   |
| List international volunteer trips you have participated in (include type and length of stay):  |                    |   |
| List specific skills applicable to volunteer trips:   |                    |   |
| Provide a personal reference (name, email address, phone number):   |                    |   |
| Signed:   |                    | Date:   |