



Volunteers in Service Department

For Internal Use
Reference Number: _____

Date Registered: _____

Volunteer Application

(It is mandatory to present your UCP ID Card at the time of placement)

Full Name: _____

Registration# _____ Semester / Status: _____

Address: _____

City: _____ Province: _____

Telephone: Landline _____ Mobile _____

Email Address: _____

Volunteer History

Do you have any previous volunteer experience? · Yes · No

(with UCP-VIS Department only)

If yes, please list below, beginning with present or most recent experience.

Campaign / Activity Name: _____

Dates of Service: _____

Current Placement

Organization: _____ Placement Hours: _____

Placement Date: _____ to _____ Placement Time: _____ to _____

Disclaimer

- 1) I have been placed at the above mentioned place with my consent and agreement.
- 2) It is also consented that department reserves the right to use my working photographs as and when required in publications, presentations, website or social media.

In case of emergency, department may call:

Parent or Guardian Name: _____

Address: _____

Telephone Number: _____

Applicant Signature: _____ **Date:** _____



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