

## Official Request for World Friends KOICA Volunteer

### 1. Type of volunteer

KOICA Volunteer ( )

**<Introduction of KOICA Volunteer >**

KOICA Volunteer : Junior expert with educational or career experiences in the field.  
(Excluding KOICA 'Dream' volunteer, KOICA Senior Volunteer)

### 2. Overview of Institution for Dispatch of KOICA Volunteer

<b>Name of country</b>		<b>Name of institution</b>	
<b>Type of business</b>	Public administration( ), Education( ), Agriculture/forestry/fisheries( ), Health( ), Industrial energy( )		
<b>Profession</b>			
<b>Contact information</b>	<b>Address</b>		
	<b>Phone</b>		<b>Email</b>

### 3. Activity Information of KOICA Volunteer

#### 1) Purpose of Institution establishment and major tasks

Purpose of Institution establishment :

Major tasks :

#### 2) Work days and hours of Institution : \_\_\_\_\_

#### 3) Form of dispatch : New( ), Successor( )

#### 4) Information on co-worker

- Name : \_\_\_\_\_, Phone : \_\_\_\_\_, Email : \_\_\_\_\_

#### 5) Case of cooperation with an institution other than KOICA for the last two years from the date of survey

- Name of country (or multilateral organization) :
- Name of institution (or multilateral organization) :
- Number of dispatched volunteer :
- Main activities (Please write briefly) :

#### 6) Benefits of ODA program/project (※ Describe the name of donor country, executing institution, name/period of program/project)

**7) Expected activities after dispatch of KOICA Volunteer**

※ Please describe exact details of activities, activity days /hours, target, number of participants

**8) Language**

- Language required for official activities including medical treatment, classes, etc. : \_\_\_\_\_
- Language required in daily life : \_\_\_\_\_


**9) Availability of office and office supplies (Please be specific, e.g. computer, printer, telephone, etc.)**

Office space (    ), desk/chair (    ), computer (    ), printer(    ), telephone (    )  
Other providable supplies (    )

**4. Required qualification for KOICA Volunteer**

- 1) **Sex** : M(    ), F(    ), Any(    ) / Choose one
- 2) **Education** : Meister or specialized high school(    ), Associate of Arts(    ), Bachelor(    ), Master(    ), any(    )  
/ Choose 1, 2 and 3
- 3) **Work experience** : (    ) months, (    ) years, any (    ) / Choose one and fill in the required period.

**5. Local and living information**

<b>Location on the map</b>			
<b>Local population</b>	(    )	<b>Distance from the capital</b>	Km
<b>Size of city</b>	Metropolis(    ), Medium-sized city(    ), Town (    )	<b>Means of transportation to the capital</b>	Airplane(    ), Automobile(    ), Train(    ), Bus(    )
<b>Living expenses/month</b>	US\$	<b>Travel time to the capital</b>	(    ) hr, (    ) min
		<b>Housing expenses/month</b>	US\$

<b>Housing</b>	Provided by Institution ( )	Dormitory( ), House( ), Apartment( ), Official residence( ), Others ( )	
	Not provided ( )		
<b>Electricity</b>	110v ( ), 220v ( ), Both ( ) Frequency of blackout( ) Duration of blackout( )	<b>Heating/Cooling</b>	Heater available ( ) Air-conditioning available ( )
<b>Safety conditions</b>	Very safe( ), Safe( ), Dangerous( ), Very dangerous( )	<b>Medical facilities</b>	General hospital( ) Hospital( ) Health center( ) N/A( )
<b>Vaccination requirements</b>			
<b>Current activities of KOICA members</b>	1) ( ) members are currently on duty in the corresponding area 2) Information on the volunteers in the area or the institution - Name : - Email : - Name of institution :		
<b>Other useful information</b>	additional information, e.g. supplies, materials to prepare before departure		

**I hereby submit the official request form to World Friends KOICA Volunteer**

(Name) : \_\_\_\_\_  
 (Position) : \_\_\_\_\_  
 (Institution Name) : \_\_\_\_\_  
 (Date) : DD/MM/YYYY  
 (Signature) : \_\_\_\_\_