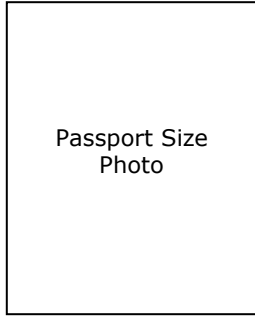




# Institute for Field Research Expeditions Presents Volunteer Abroad Program



## Application for Volunteer Program: Brazil

### Application Steps:

#### Step 1

Book/reserve your project mailing us the application form. You can also apply online. Each application must be submitted with \$200 non-refundable program deposit fee. **IFRE guarantees you a placement. If not, we will refund your \$200 deposit.** The program deposit is later deducted from the total program fee.

#### Step 2

Once we receive your application with \$200 deposit fee, we will send your application immediately (within 24 hours) to our country coordinator for processing. Our coordinator matches your interest, finds the most suitable volunteer placement, and makes an arrangement for rooms/foods and other logistic supports. It generally takes 1-3 weeks.

#### Step 3

Once you receive your placement details (or confirmation) from GFI, you consult your doctor, take vaccination (if needed), apply visa, purchase tickets and make necessary travel arrangements. Please fax a photocopy of your passport and itinerary to our office. **Participants must make a full payment of the program fee at least 2 months prior to departure.**

#### Step 4

We pass your arrival information to our coordinator. Our coordinator will receive you at the airport, and transfer you to hotel/hostel. The next day, your program starts with orientation. Our field staffs and coordinators are always available if you need any kind of services and supports.

Please complete and fax/mail this application to

Institute for Field Research Expeditions (IFRE)  
8500 N Stemmons Frwy #5030 K  
Dallas, TX 75247  
Telephone: 214-504-2491  
Toll Free (USA): 1-800-675-2504  
Toll Free (UK): 0-800-310-1437  
Fax: 214-666-3169  
Email: [info@ifrevolunteers.org](mailto:info@ifrevolunteers.org)

### Personal Details

Last Name

First Name

Home Address

Mailing Address

Phone (Home)

E-mail Address

Phone (Mobile)

Date of Birth

Sex

Nationality

Passport number

Emergency Contact Address (please provide complete name, address, relationship, email and telephone number)

Please select and write your first and second project of choice as per the list below:

- Work Orphanage
- Disadvantaged Children/Children at Risk
- English-Teaching
- HIV/AIDS Project
- Healthcare/Health Promotion
- Teaching Computer Skills
- Recreational/Sports

First priority project:

Second priority project:

Program start date (please specify the month and the year)

- (1) First Monday of \_\_\_\_\_
- (2) Third Monday of \_\_\_\_\_

**Additional Information**

Please explain what motivated you to participate in Institute for Field Research Expeditions volunteer program:

Please explain your academic qualification and any relevant experience:

Has there been a time in your life when you had to go beyond your comfort zone? If yes, please explain:

Please write your concerns or questions (if any):

By signing here, I acknowledge that I have thoroughly read all the terms and conditions of Institute for Field Research Expeditions (please visit [http://www.ifrevolunteers.org/terms\\_conditions.php](http://www.ifrevolunteers.org/terms_conditions.php)) for my placement. I hereby agree on all the terms and conditions given by Institute for Field Research Expeditions, including the organization's responsibilities, my responsibilities, my liability waiver, and the termination conditions of my volunteer program. I understand everything that I have read, and I will fully abide by all the terms and conditions laid out by Institute for Field Research Expeditions.

Signature:

Date:     /     /

**Payment information:**

I would like to pay my program deposit of USD 200.00 by using

- a) Cheque (please attach with application)
- b) Bank Transfer (please fax the receipt)
- c) Credit Card (we accept VISA and MasterCard only)

Card type (please check):   1) Visa                   2) MasterCard

Card Number:

Would you like pay your full amount by using Credit Card?

- a) Yes
- b) No

If yes please write USD= .....

Card Expiry Date:

CBS number (last 3 digits in the back of the credit card) \_\_\_\_\_

Card Holder Name:

Address:

Signature:

Date: / /

Official use only:

Name:

Placement:

Departure Date:

Nationality:

Name of Placement