|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **WORLD MEMON ORGANIZATION**  **YOUTH WING** | | | | | | C:\Users\nilungar\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Word\WMO_hiresolution_logo_Final with tag2 (2).jpg |
|  | | | | | | |
| **Application for** | | | | | | |
|  |  | | | | | |
| **Full Name** | |  | | | | |
| **Fathers Full Name** | |  | | | | |
| **Date of Birth** | | Click here to enter a date. | **Age** |  | | |
| **Gender** | | Choose an item. | | | | |
| **Home Address** | |  | | | | |
|  | | | | |
| **City** | |  | **Country** |  | | |
| **Mobile Number** | |  | **Land Line** | - | | |
| **E-mail Address** | |  | | | | |
| **Educational/ Qualifications (please set out your qualifications to date)** | | | | | | |
|  | | | | | | |
| **Profession (if applicable)** | |  | | | | |
| **Details of current employment** | |  | | | | |
| **Chapter** | | Choose an item. | | | | |
| **Are you a member of WMO** | | YES | | | | |
| **If Yes Membership Category** | | Choose an item. | | | | |
| **If No** | | Please apply for Membership at [www.wmoworld.com](http://www.wmoworld.com/) | | | | |
| **Member since** | |  | | | | |
| **Positions held in WMO** | |  | | | | |
| **Give a brief description about yourself (up to 150 words)** | | | | | | |
|  | | | | | | |
| **What has been your participation/involvement in WMO activities in the past** | | | | | | |
| i | | | | | | |
| **Membership of other Social and Charitable Organizations** | | | | | | |
| **Organization** | | | **Position** | | | |
|  | | |  | | | |
| **Give a Brief History of Social and Charitable Activities you have been involved in** | | | | | | |
|  | | | | | | |
| **Awards and Citations received** | | | | | | |
|  | | | | | | |
| **Describe Your Vision for WMO Global Youth Wing** | | | | | | |
|  | | | | | | |
| **Explain briefly why you think you are suitable for this position and if given the opportunity what would you like to accomplish specifically within the next 3 years** | | | | | | |
|  | | | | | | |
| **I hereby confirm the information provided above is true and correct to the best of my knowledge. I hereby agree to the Aims and Objectives of WMO and will abide by its Constitution, Standing Order and Policies** | | | | | | |
| **Signature of Applicant** | |  | **Date** | | Click here to enter a date. | |
|  | | | | | | |
| **Please provide the following details of a personal or professional referee** | | | | | | |
|  | | | | | | |
| **Reference 1** | | | | | | |
| **Name** | |  | | | | |
| **Mobile Number** | |  | **Land Line** |  | | |
| **E-mail address** | |  | | | | |
|  | | | | | | |
| **Reference 2** | | | | | | |
| **Name** | |  | | | | |
| **Mobile Number** | |  | **Land Line** |  | | |
| **E-mail address** | |  | | | | |
|  | | | | | | |
| **OFFICE USE ONLY** | | | | | | |
|  | | | | | | |