

Environment and Social Development Organization-ESDO

Internship Program Application

I am applying for internship in Environment and Social Development Organization-ESDO

Personal Information	
Name: *	Gender: *Male \Box Female \Box
Email: *	
Mobile: *	
Date of Birth: *	
Country of Citizenship: *	

Educational Information

Name of Institution	Subject	Year of Passing	Result
	Name of Institution	Name of Institution Subject Image: Subject institution Image: Subject institution Image: Subject institution Image: Subject institution	Name of InstitutionSubjectYear of PassingImage: SubjectImage: SubjectIma

Working Experience (if any):

Organization & Position	Duration	Responsibilities

Expected date of graduation / masters (month and year):

Knowledge of English: *_____Bangla_____

Extracurricular Activities (Describe your 3 most important extracurricular activities, including positions held and major achievements). [Max. 100 words each]





Extracurricular 1: *

Extracurricular 2: *

Extracurricular 3: *

Volunteer Experience: (if any)

Please describe any notable skills or interests you possess with which you may use to help Environment and Social Development Organization-ESDO achieve its goals in new and innovative ways (Examples: photography, graphic design, film editing, computer programming, journalism, marketing)

Experience living in a village community (If any):

Have you ever lived or worked in a poor country? Briefly describe your experiences. [Max. 50 words]

Internship Information

Dates Available: *(List your available start and end dates to serve as an intern. Keep in mind that a **minimum commitment of six months** and a **maximum of one year is required**.).

Start Date: _____End date: _____

<u>Declaration of Service:</u> I would like to apply for internship in ESDO, and confident to finish my assigned job accordingly.

Confidentiality Statement/Disclaimer and Internship/Volunteer Agreement

Environment and Social Development Organization-ESDO reserves the right to withdraw its approval of the Intern at any time. I further verify that I am in proper physical and mental condition to work at ESDO. I agree to keep all matters relevant to ESDO's beneficiaries confidential, and understand the consequences shall any personal information be shared outside ESDO.

Signature: Date : Recommendation (Department head/supervisor of the current Institution):

Applicant Signature: Name: Contact: Tel/Cell number: Email:

