

Application for Working Visit

(This information will be treated confidentially)

Contact Details

Name:

Address:

Postcode:

Phone:

Email:

Date of Birth:

Details of Next of Kin

Name:

Address:

Phone:

Please Provide Details of a Referee

Name:

Address:

Phone:

Visit Details

I would like to arrive on:

I would like to depart on:

Have you visited Akshobya Buddhist Centre before?

Yes

No

Please explain briefly why you would like to visit Akshobya Buddhist Centre

Do you have an NKT Centre that you regularly attend?

Yes

No

Please give details of any other Dharma Centres (if any) you have visited

Please tick any of the following skills you may have

Gardening

Building

Decorating

Computers

Administration

Web Design

Cleaning

Electrical

Cooking

Please list any other skills you think might be useful

Personal Details

Do you have any physical or mental disabilities?

Yes

No

Are you currently taking any medication?

Yes

No

Please give any more information about yourself and your interests that would be useful for us to know

Please tell us how you heard about Akshobya Buddhist Centre

Thankyou for taking the time to fill in this form.



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