**Questionnaire for a candidate for the position of the coordinator of a country office of the Public Movement of Medical Volunteers**

Please, answer all the questions carefully (particularly, question №9).

After filling in this form, please send it to lozovnaya@volmedic.com. The response will be provided as soon as possible.

**All fields are mandatory!**

|  |  |
| --- | --- |
| 1. Name and Surname |  |
| 2. Age |  |
| 3. Country, city |  |
| 4. Citizenship  |  |
| 5. Place of study/work, your position |  |
| 6. Education |  |
| 7. Do you have any experience as a volunteer? If so, please describe.  |  |
| 8. Please, tell us about your experience in organizing events and managing projects (names of events, dates, functions). |  |
| 9. Why do you want to become a coordinator of the Movement in your country? |  |
| 10. What are the main challenges faced in the field of public health in your country?  |  |
| 11. Please, describe your vision of developing the Movement in your country according to the local characteristics of the public health system. Which of the challenges you mentioned could be potentially tackled by the country office?  |  |
| 12. In your opinion, which of the aforementioned challenges can be solved with the help of the country office? |  |
| 13. Any additional information you would like to share with us. |  |
| Contact details: |  |
| Phone number |  |
| Е-mail |  |
| Link(s) to your profile(s) on social network(s) |  |