

St. John Rescue Corps - Malta

A VOLUNTARY ORGANISATION UNDER THE AUSPICES OF
THE MOST VENERABLE ORDER OF THE HOSPITAL OF ST. JOHN OF JERUSALEM
HEADQUARTERS AND TRAINING SCHOOL
FORT MADALENA, MADLIENA



THE INFORMATION PROVIDED WILL ONLY BE USED WITHIN THE ST. JOHN RESCUE CORPS. ALL DATA WILL BE TREATED AS CONFIDENTIAL.

COMPLETE USING BLOCK LETTERS

APPLICATION DATE _____	NAME & SURNAME _____ MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> MAIDEN NAME _____ ADDRESS _____ _____ TELEPHONE NO: _____ SUMMER RESIDENCE _____ _____ TELEPHONE NO: _____ EMAIL : _____
AFFIX HERE A RECENT (PASSPORT SIZE) PHOTOGRAPH OF YOURSELF	

DATE OF BIRTH (DATE / MONTH / YEAR) _____ / _____ / _____ AGE LAST BIRTHDAY _____

IDENTITY CARD NO: _____ MOBILE TEL NO: _____ BLOOD TYPE: _____

PLACE OF BIRTH: _____ NATIONALITY: _____ PASSPORT NO: _____

SOCIAL STATUS: SINGLE MARRIED WIDOWED SEPARATED DIVORCED ANNULLED

IF YOU HAVE DEPENDENT CHILDREN, STATE AGES _____

NAME OF RECENT SCHOOL, UNIVERSITY, etc.	FROM	TO	CERTIFICATE DIPLOMA or DEGREE	MAIN SUBJECT OF STUDY

FROM WHERE/WHOM DID YOU HEAR ABOUT THE CORPS? _____

WHAT ARE YOUR HOBBIES/INTERESTS? _____

WRITE DOWN ANY SKILLS WHICH YOU MIGHT HAVE AND WHICH MIGHT BE BENEFICIAL TO THE CORPS
e.g. video editing skills, Photoshop, public relations, welding, carpentry, etc.

PROFESSIONAL LICENCE/S HELD _____

