Chi Heng Foundation Internship Application Form

Limit form to one page. Along with this form, please include a cover letter and resume.

Name:			Age:		Birth date:		
Address:							
Phone:		Ema	il:				
Best time to call:]]	Passport Country:				
Program you prefer to work with (mark one with "X"):							
AIDS Orphan Project							
MSM Outreach Program							
Both/General							
Type of internship preferred (mark "X" for all that apply):							
Direct service (limited a Administration	Publications Public Relations/Publicity						
Translation (English/Man	Web Page/Computer Graphic Design						
Other (must confirm alternate type with CHF before selecting this option) Research/Evaluation							
Brief Summary of							
Relevant							
Experience:							
Educational							
Experience (School, time							
attended, major,							
degree):							
Native Language:							
Other Languages							
(written and oral fluency levels for each):							
Computer Skills:							
Availability (mark all Fall semester Spring semester Summer semester							
that apply with "X"): Full time			Part time				
Preferred Office: Hong Kong Beijing Shanghai No Preference					rence		
References (minimum of three):							
Name	Company/ Position	Relationsh Length of		En	nail	Phone/Fax	
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Personal Information Collection Statement:

CHF may use your contact information to communicate with you for newsletters, marketing materials and update of our services and fundraising activities through direct mailing, email, telephone etc. We will not sell and/or provide your personal data to any third party other than our staff, appointed volunteers and institutions who are necessary for these functions. The provision of personal data is purely voluntary, however, our services may be delayed or cannot be provided if data is insufficient. You have the right to access, update and request CHF to stop using your personal data for the above purposes by notifying the office manager with email to info@chihengfoundation.com or by mail to G.P.O. Box 3923, Central, HK.