

# Volunteer Program Participation Questionnaire

## (Alternative to Criminal Background Check)

Python Academics Tokyo & Green Lion

**Purpose:** This questionnaire serves as an alternative to submitting a criminal background check. It is designed to assess the suitability of individuals applying to participate in volunteer programs and to collect essential information for recommending participants to host organizations.

**Requirements:** The host organization requires basic information regarding your background, health condition, and personal conduct to ensure your safety and the smooth operation of the program.

**Confidentiality:** Please answer all questions honestly and accurately. The information provided will be used solely for program operation and will not be used for any other purpose.

### PERSONAL INFORMATION

Full Name (as on passport): \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_

Gender: \_\_\_\_\_

Nationality: \_\_\_\_\_

Contact (Email & Phone): \_\_\_\_\_

### BACKGROUND & EXPERIENCE

1. Do you have any previous experience in volunteering, community service, education, or healthcare?  
☐ Yes ☐ No  
If yes, please describe: \_\_\_\_\_

2. Do you have any medical conditions, physical limitations, or allergies?  
☐ Yes ☐ No  
If yes, explain: \_\_\_\_\_

3. Do you have any dietary restrictions or preferences?  
☐ Yes ☐ No  
If yes, specify: \_\_\_\_\_

4. Have you ever been subject to disciplinary action at school, work, or in another organization due to misconduct or behavioral issues?  
☐ Yes ☐ No  
If yes, please explain the circumstances: \_\_\_\_\_

5. Is there anything in your background (e.g., past legal issues or personal conduct) that may affect your participation in an international volunteer program?  
☐ Yes ☐ No  
If yes, please explain: \_\_\_\_\_

### EMERGENCY CONTACT

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Relationship: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

### MOTIVATION & AGREEMENT

Why do you want to participate in this volunteer program?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you agree to follow all safety guidelines and instructions provided by the host organization?  
☐ Yes ☐ No

**DECLARATION:** I declare that the information provided above is truthful, complete, and accurate to the best of my knowledge. I understand that any false or misleading information may result in disqualification from the volunteer program.

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_