**Europe Region WAGGGS Region Volunteer Application:
Member Organisation Approval Form**

**Applicant:**

Give your motivation to why you are applying to join one of the Europe Region volunteer teams and why you would be a good regional volunteer (Max 300 words)

**International Commissioner’s Confirmation**

I confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(insert applicant’s name) is a member of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(insert name of Member Organisation) and has our organisation's support to apply for the role of Europe Region Volunteer for the triennium 2023 – 2025.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Date) (Name of IC) (Signature of IC)