

BACK TO SCHOOL YOUTH INITIATIVE GROUP
VOLUNTEER APPLICATION FORM
MY PART PROJECT
TUYIBIMBEMO – LET'S GET INVOLVED PROJECT

ABOUT BACK TO SCHOOL YOUTH INITIATIVE GROUP

Back to School Youth Initiative Group is a grassroots and youth-driven organization based in Kabwe District, Central Province of Zambia. The organization is composed of dedicated young people who are passionate about creating positive change through education, youth empowerment, leadership, civic engagement, and advocacy.

The organization was founded in October 2022 by a team of committed young people determined to address the challenges affecting youth in Zambia. It was officially registered under the Registrar of Societies on 27th April 2023 with Registration Number ORS/102/33/33601 in accordance with the Societies Act Cap 119, Section 7(2).

Back to School Youth Initiative was established to bridge educational gaps, promote gender equality, empower young people, and amplify youth voices in decision-making processes. Since its establishment, the organization has continued to grow and now has a strong membership of young people aged 18–35 who share a common vision of creating sustainable and inclusive communities.

ABOUT THE PROJECT

Tuyibimbemo – Let's Get Involved Project is being implemented under the MY PART Project, funded by ActionAid Zambia and Restless Development Zambia with support from the European Union.

Overall Goal

To enhance meaningful, inclusive, and sustained youth participation in policy dialogue and public decision-making processes in Zambia, ensuring that youth-related policies reflect the needs, priorities, and aspirations of young people.

The project will be implemented in the following communities of Kabwe District:

• Makululu • Katondo • Nakoli • Natuseko

Volunteers will play an important role in mobilizing young people, supporting community activities, promoting civic engagement, and strengthening youth participation.

APPLICANT DETAILS

Full Name: _____

Age: _____

Sex: ☐ Male ☐ Female ☐ Prefer not to say

NRC Number: _____

Cell Number: _____

Email Address (Optional): _____

Community: _____

Occupation: _____

Highest Level of Education: ☐ Primary ☐ Secondary ☐ Certificate ☐ Diploma ☐ Degree ☐ Other

VOLUNTEER INFORMATION

1. Where did you hear about Back to School Youth Initiative?
2. Why do you want to volunteer with Back to School Youth Initiative under the MY PART – Tuyibimbemo Let's Get Involved Project?

3. What are the major challenges affecting young people in your community?

4. How do you think these challenges can be addressed?

5. Are you able to mobilize community members and young people to participate in project activities?

☐ Yes ☐ No

If Yes, explain the platforms or methods you will use.

☐ WhatsApp Groups

☐ Facebook

☐ Community Meetings

☐ Church

☐ Schools

☐ Sports Activities

☐ Door-to-Door

☐ Other _____

Explain:

If No, please give a reason.

6. Have you ever volunteered with any organization before?

☐ Yes ☐ No

If Yes, state the organization and your role.

7. What skills or experience can you contribute to this project?

8. What are your strengths?

9. What are your weaknesses?

10. Are you willing to attend trainings, meetings and community activities, including weekends if necessary?

☐ Yes ☐ No

11. How many hours per week can you dedicate to volunteering?

☐ 2–5 Hours

☐ 6–10 Hours

☐ More than 10 Hours

12. Do you have access to a smart phones?

☐ Yes ☐ No

13. Are you a member of any youth club, church group, community group or student association?

☐ Yes ☐ No

If Yes, specify.

14. Why should Back to School Youth Initiative select you as a volunteer?

15. Is there anything else you would like us to know?

DECLARATION

I certify that the information provided in this application is true and correct to the best of my knowledge.
I understand that submitting this application does not guarantee selection as a volunteer.

Applicant's Name: _____

Signature: _____

Date: _____

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Application Received By: _____

Date Received: _____

Interviewed: ☐ Yes ☐ No

Recommendation:

☐ Selected

☐ Waitlisted

☐ Not Selected

Remarks:

Officer's Name: _____

Signature: _____