

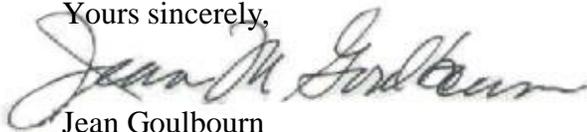
Dear Volunteer,

Thank you for deciding to become a part of the Natasha Goulbourn Foundation family. Through God's grace, we have been brought together so that we can empower the Philippine nation to take a more proactive step in recognizing and treating depression. This mental illness is still seen as a "taboo" in this society. This unfortunate misunderstanding has led millions of people not to seek help and suffer in silence. Through your kindness and generosity, we are one step closer in *bringing depression to light*. Below you will find a list of activities we would need assistance in. To ensure an effective and meaningful relationship, we ask that you please check which activity you would like to be active in, and how many hours you can commit.

Please remember that while we appreciate your enthusiasm to be part of our group, we need people who are committed to be active. We are on a mission to save lives, and this advocacy requires dedication.

Kindly fill out the form as accurately and completely as possible. For any concerns, please do contact us at (+632) 897 2217 or 8962068 or visit our website at [www.ngf-hope.org](http://www.ngf-hope.org).

Yours sincerely,



Jean Goulbourn  
President

---

The **Natasha Goulbourn Foundation** is a non-profit organization dedicated to *bringing depression to light* through the use of educational lectures, confidential crisis lines and referrals to partner psychologists. We see ourselves as a hub whose primary goal is information awareness on depression and how one can prevent, recognize or treat this mental illness.

In our efforts to launch a nationwide campaign of mental fitness and health, we have partnered with Department of Health (DOH), Department of Education (DepEd) and Department of Social Welfare and Development (DSWD) along with top schools such as University of the Philippines, Ateneo de Manila University and Miriam College. We are currently working on partnering with several cities, civic organization and psychology clinics so that we can further our mission.

Please email completed form to [ngfoundation@gmail.com](mailto:ngfoundation@gmail.com)  
For any questions or concerns, please contact (+632) 8972217 or (+632) 8962068.

Type of Volunteer: <input type="checkbox"/> Part-time (3 months trial period) <input type="checkbox"/> Full time (minimum of a year)
--

## VOLUNTEER INFORMATION SHEET

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Gender: Female/Male  
Contact number (Landline/Mobile): \_\_\_\_\_  
E-mail: \_\_\_\_\_

Permanent address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current address (if different from permanent address): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(If currently employed- Kindly write N/A if not applicable)  
Employer: \_\_\_\_\_  
Place of employment: \_\_\_\_\_  
Hours of work: \_\_\_\_\_

Do you have any chronic diseases we should know about (asthma, diabetes, hypertension, etc.):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been diagnosed with depression: Yes/No  
If yes, are you currently taking any medication for it: Yes/No  
If yes, are you still suffering from depression presently: Yes/No

Have you had a family member or close friend who suffered or is suffering from depression:  
Yes/No  
(Optional) If yes, please indicate type of relationship (e.g. brother/friend/etc) and level of severity (mild, severe, etc.) \_\_\_\_\_  
\_\_\_\_\_

Have you attempted suicide: Yes/No  
If yes, how long ago was it before your last attempt: \_\_\_\_\_

Have you had a family member or close friend who has committed suicide? Yes/No  
(Optional) Anything you would like to share about this: \_\_\_\_\_  
\_\_\_\_\_

How did you find out about NGF: \_\_\_\_\_

Kindly check the area of activity you would like to be active in. Please do only check TWO (2) AT THE MOST:

Research

- We need to know more about depression! Checking this box would mean gathering information on the latest news on the treatment of depression. This includes, but is not limited to: the medical aspect (anti-depressants, etc.), traditional or ancient methods (such as electric shock) and alternative (such as using food and exercise in treating depression).
- Compiling data from Western sources is accepted, but data from the Philippines (or Southeast Asia, when not possible) is highly encouraged
- Volunteers under this area should be knowledgeable in proper citation of reference (such as APA or MLA)- We do not plagiarize and cite our sources properly!

Media partnership

- Lessening the stigma attached to depression requires educating the public about it. We hope to come out monthly in magazines or have regular appearances on television and radio.
- This is divided into two aspects: those that will coordinate and set up these interviews/write-ups and those that will be talking/writing about it.
- Volunteers may choose to do both aspects or be assigned to a specific area. Survivors of attempted suicide are encouraged to talk or write about their personal experience.

Fund-raising

- As with any non-profit organization, we depend on the kindness of companies and private individuals.
- Volunteers knowledgeable in writing sponsorship letters or communicating with companies or individuals are encouraged to be part of this area.

Lecture

- We plan on having lectures in schools, churches and communities monthly. We would need volunteers to help us coordinate, manage and plan these activities.

Merchandising

- NGF would need people who are skilled in marketing our existing products and thinking of new products
- Volunteers would assist in partnering with different clothing/retail brands

Events

- NGF has annual fund-raising events which would require a team to help set-up and prepare. This includes, but is not limited to, coordinating for the venue, pricing, food (if necessary), seating and any other requirements necessary for an event.

Number of hours to commit every week: \_\_\_\_\_

For a total of: \_\_\_\_\_ hours/ month

Please email completed form to [ngfoundation@gmail.com](mailto:ngfoundation@gmail.com)

For any questions or concerns, please contact (+632) 8972217 or (+632) 8962068.

## DISCLOSURE OF CONFLICT OF INTEREST

In order to ensure the efficacy and credibility of the foundation, we have to be careful with whom we choose to have a relationship with.

By signing your name below, you are agreeing to the following terms:

- 1) That you are not an active member of any pharmaceutical company
- 2) That you are not related, in any way, to products and services of other companies or groups that are seen to be harmful to patients suffering from depression or any other mental illness.

I do hereby certify that all information stated above has been filled as accurately to the best of my abilities. I acknowledge that that the Natasha Goulbourn Foundation is free to use the stated information to perform any background check (if necessary) and should any information be found inaccurate could cause the immediate removal as a volunteer of the foundation.

I understand that I am volunteering on my own free will, that I am not coerced or forced to join and therefore, my commitment is pure and strong.

---

Signature over printed name

---

Date