



Welcome! We look forward to your joining us for one of Heart Care International's medical mission trips.

VOLUNTEER APPLICATION PROCESS:

1. **Fill out the forms** listed below and email them as PDFs to Betsy Tirado (Logistics Director) betsy@heartcareintl.org and Margaret Feldmeth (Executive Director) margaret@heartcareintl.org:
 - Volunteer Bio/Travel Form (below)
 - Confidential Medical History Form (below)
2. **Fill out (manually) the Liability Release Form (use link on website) and have it notarized.** Please mail to:
Heart Care International
1273 East Putnam Ave #941
Riverside, CT 06878
3. **Scan the required documents** below (scan as separate documents, please) and email PDF versions to Betsy and Margaret:
 - Your medical, nursing or professional license (***must have a minimum of 6 months prior to expiration or the host country will not allow you in***); NOTE: this cannot be an email verification form, it needs to be the actual license
 - Your medical/nursing diploma
 - Your most up-to-date CV (resume)
 - Color copy of the photo and signature pages of your passport; NOTE: must be signed, scanned (ie not photographed) AND must not expire before 180 days from trip return date (ie a full 6 months)
 - **NEW: Copy of your COVID-19 Immunization card, including dates and doses received (must include at least 1 booster - requirement of all our host hospitals)**

NOTE: All traveling team members **MUST** be fully vaccinated and boosted against Covid-19 to comply with our host hospital requirements. No exceptions to this for our traveling team members. [If you choose to not get vaccinated and boosted, you are still welcome to join the HCI team as a non-traveling member.]



A SPECIAL NOTE TO NURSES: A minimum of 3 years of pediatric cardiovascular ICU experience is required to join the traveling team.

Once all steps are completed, you will be contacted by one of the HCI Team Captains for a Zoom conversation. NOTE: If you are invited to join a trip, you will be asked to pay the annual team dues - \$500 for doctors and \$300 for all other medical professionals. **You may pay online on our website (including the processing fee) or via check.**

Why do we need these documents? HCI must obtain temporary licensure for you in each host country. Our host countries have very specific and rigid credentialing guidelines. Your credentials must be approved by the host country government BEFORE you can travel.

Your application for participation will NOT be considered complete until all documents are received, and you have paid the annual dues.

LOGISTICS AND TIMING:

A few weeks before your trip we will email you specific details (hotel name/address, hospital contacts, tentative itinerary, etc). Your in-country work schedule will be managed by your team captain and communicated upon your arrival.

Please pack a white lab coat (required when walking in the hallways of all our host hospitals), your own medical supplies (ie stethoscope), and your own scrubs.

COVERED EXPENSES:

Heart Care International will cover the following expenses for all team members:

- **Airfare:** HCI may cover a portion or the full airfare (depending on city of departure) for the 'official' trip dates, to and from a major departing city. You may be responsible for travel from your home city to a major city. Additional charges to your travel for vacation or sight-seeing are your responsibility.
- **Lodging:** HCI covers the cost of double occupancy rooms for all team members. You will have a roommate. If you wish to have a single room, you will be required to pay for the room. Rooms are covered from the night before your work begins through the night of your last day of work. Additional nights are your responsibility. Also, all personal expenses such as room service, phone and laundry are your responsibility.

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- **Local transportation:** HCI covers airport pick-up upon arrival (on the pre-fixed dates) and transportation between the hotel and hospital.
- **Meals:** HCI covers two meals per day – breakfast at the hotel, and one meal at the hospital.

YOUR FINANCIAL PIECE:

Once you receive written confirmation from either Margaret Feldmeth or Betsy Tirado that you have been assigned to a trip, please pay your team dues (annual minimum is \$500 for doctors and \$300 for all other medical professionals).

HCI depends on our donors and volunteers to help support mission trip expenses. The fee is 100% tax deductible and can be paid online at www.heartcareintl.org (click on the 'donate' button). You may also mail a check to:

Heart Care International
1273 East Putnam Ave #941
Riverside, CT 06878

- **NOTE:** Your travel will be booked after your team dues have been paid and all documentation has been provided and approved.



VOLUNTEER BIO AND TRAVEL FORM

Personal Contact Information:

Name (as it appears on your passport):

Street Address:

City, State, Zip:

Birth Date:

Home phone #:

Work phone #:

Fax#:

Pager/Cell #:

Email Address (which you check frequently):

Name of Medical School/ Nursing School:

DIETARY RESTRICTIONS:

Travel Information:

Passport#:

Expiration Date:

Country of citizenship:

Departing city:

Returning city:



CONFIDENTIAL MEDICAL HISTORY FORM

Date:

Name:

Birth Date:

Home Address:

Home Phone:

Work Phone:

Emergency Contact Information:

Contact Name:

Contact Phone:

Relationship:

Allergies:

Significant Medical Issues:

Medications taken regularly:

Drug Name	Dose	Frequency
1)		
2)		
3)		

Primary Physician Name:

Address:

Phone:

This information is confidential and used only in case of a medical emergency.