



# Volunteer Application Form

## (A) PERSONAL PARTICULARS

Name: \_\_\_\_\_

NRIC No.: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_

Religion: \_\_\_\_\_ Sex: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Contact Nos: \_\_\_\_\_ (Home) \_\_\_\_\_ (Office)

\_\_\_\_\_ (Handphone/ Pager)

Email: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Highest Educational Qualifications: \_\_\_\_\_

Occupation: \_\_\_\_\_

## (B) OTHER INFORMATION

(Q1) What is your interest?

\_\_\_\_\_

(Q2) Nature of Service

Direct Volunteering -- enjoy meeting and interacting with students

E.g.

- Assist teachers and therapists in the classrooms
- Assist in PE lessons, Games, Art & Craft, Home Economics, Music and other indoor activities
- Assist in educational excursions
- Teach a skill
- Make teaching resources

Indirect Volunteering -- enjoy getting involved behind the scene

E.g.

- Administrative work such as photocopying and stapling, typing
- Organizing and planning various activities.
- Cleaning, painting, repairing and maintenance of premises.
- Gardening.
- Assist in the production of publications and newsletters in areas such as photography, copywriting, copy editing, graphic design and printing.

(Q3) How often can you help?

Help on project / ad hoc basis.

Help regularly.

(Q4) Available from (DD/MM/YYYY)  to  on the following time

Session	Mon	Tues	Wed	Thurs	Fri
Morning (0845 – 1245)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon (1300 - 1700)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(Q5) Language Ability

Language	English	Malay	Mandarin	Tamil
Spoken	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(Q6) Experience in volunteer work in special schools

Yes Organization: \_\_\_\_\_  
Duration: \_\_\_\_\_  
Nature of volunteer work: \_\_\_\_\_

No

(Q7) Referee

Please provide the following particulars of 2 referees

1) Name : \_\_\_\_\_

2) Name : \_\_\_\_\_

Contact No : \_\_\_\_\_

Contact No: \_\_\_\_\_

Occupation : \_\_\_\_\_

Occupation : \_\_\_\_\_

Relation to you : \_\_\_\_\_

Relation to you : \_\_\_\_\_

Years known : \_\_\_\_\_

Years known : \_\_\_\_\_

**(C) DECLARATION**

1. Have you ever suffered or are you suffering from any physical impairment, disease or mental illness, or have received psychiatric treatment?

Yes

No

2. Have you ever been arrested or convicted in a court of law of any country?

Yes

No

3. Have you ever been charged with any offence in a court of law in any country for which the outcome is not yet known?

Yes

No

If any of your answer is "Yes" to questions, please supply the details below:

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In submitting this form, I declare that the particulars in this application are true to the best of my knowledge and belief, and that I have not willfully suppressed any material fact.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**For Official Use Only:**

Volunteer interviewed by: \_\_\_\_\_ Designation: \_\_\_\_\_

Task / Work Assigned: \_\_\_\_\_

Commencement Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Interviewer: \_\_\_\_\_ Date: \_\_\_\_\_