

義工申請表

Po Leung Kuk Tsui Lam Centre Volunteer Application Form

I. 中文姓名 _____ 英文姓名 _____
 Name in Chinese: _____ Name in English: _____
 身份證號碼 _____ 性別 _____
 HKID Card No.: _____ Sex: _____
 住所地址 _____
 Address: _____
 郵寄地址 (如與上述不同) _____
 Correspondence Address: _____
 電話 (手提) _____ (電郵) _____
 Telephone No. (Mobile): _____ (Email): _____

相 片
Photo

* 請選擇可接收服務資訊的途徑：

Please indicate the channels by which you want to receive service information:
 Whatsapp 電話短訊(SMS) 來電(Phone call)

II. 學歷 Educational Background:

未入學 No Schooling 小學 Primary 中學 Secondary 專上 Post-secondary
 大學或以上 University or above 其它(請註明) Others(please specify): _____

III. 職業 Occupation: _____

IV. 語言 Language:

廣東話 Cantonese 普通話 Mandarin 中國方言 Chinese dialect _____
 英語 English 印度 Hindi 印尼 Indonesian
 尼泊爾 Nepali 烏都 Urdu 菲律賓 Filipino
 泰國 Thai 越南 Vietnamese 其他 Others _____

V. 義工服務經驗 Volunteer work experience

沒有 少於 1 年 1 至 3 年 3 至 5 年 5 年或以上
 No less than 1 yr 1 to 3yrs 3 to 5yrs 5 yrs or above

如有，請註明服務類別：

If yes, please specify service type : _____

VI. 請以次序 1 至 6 排列優先選擇之服務類別 (請以「x」註明不選擇項目) Please rank service type in order of preference from 1 to 6 (Please put "x" to indicate the non-selected item) :

____ 陪同受害人參與司法程序 Accompany victims to go through judicial process

____ 托管兒童 Temporary child care support

____ 陪同受害人或家人尋找及使用社區資源 Accompany victims or their family members to locate and use different community resources

____ 家訪/家居安全/生活指導 Home visit / provide guidance and training to victims or their family members on basic skills about home safety, personal care, household management and life adjustment

____ 服務推廣及宣傳 Service promotion and publicity

____ 其他 (請註明 _____) Others(Please specify) _____

VII. 請以次序 1 至 6 排列優先選擇之服務地區(請以「x」註明不選擇項目) Please rank your choice of location in order of preference from 1 to 6 (Please put "x" to indicate the non-selected item) :

_____ 香港及離島	Hong Kong and Islands
_____ 觀塘、黃大仙及西貢	Kwun Tong, Wong Tai Sin, Sai Kung
_____ 油尖旺、深水埗及九龍城	Yau Tsim Mong and Sham Shui Po
_____ 荃灣及葵青	Tsuen Wan and Kwai Tsing
_____ 沙田、大埔及新界北	Shatin, Tai Po and North
_____ 元朗及屯門	Yuen Long and Tuen Mun

VIII. 請 可服務之日期和時間 Please date / time that you are available for service:

	星期一 Mon.	星期二 Tue.	星期三 Wed.	星期四 Thu.	星期五 Fri.	星期六 Sat.	星期日 Sun.
上午 AM							
下午 PM							
晚上 EVENING							

IX. 認識本服務的途徑 Ways of knowing our service:

- 網上 Internet (請註明 please specify : _____) 報章/雜誌/電台 Media
 單張/海報 Leaflet/ poster 社會服務機構 Social service agency (請註明 please specify : _____)
 朋友 friend 其他 Others _____
 介紹人/ 機構 (如適用) Source of Referral (if applicable): _____

X. 同意及聲明 Agreement and statement

本人同意於接受培訓或參與活動期間可能會被拍攝作日後服務推廣用途。

I consent my photos which taken during the trainings or activities can be published for service promotion.

本人明白和同意以上資料只會用作本人之義工申請及登記，而該等資料均會保密。有關保良局社會服務部保障資料之政策及措施可參閱中心張貼之通告及向單位主任查詢。

I understand and agree that the information given above is strictly confidential and only for the volunteer application and registration purposes. Information on policies and guidelines to Personal Data (Privacy) Ordinance of Po Leung Kuk Social Services Department is available at the notice board of service unit and through enquiries to the officer-in-charge.

此表格上之個人資料除作上述用途外，本局將不時透過直接郵遞、電郵、電話、手機短訊及傳真等途徑，向閣下提供有關本局動向、服務推廣及籌募活動等的資訊，屆時將需要使用閣下存於本局之聯絡資料與閣下通訊。如不擬收取，請與保良局翠林中心聯絡或在以下方格內加「✓」號後交回本中心，電話：(2894 8896) 或傳真：(2894 8038)。

本人不欲收取任何保良局上述的宣傳郵件。

Your personal data provided in this form will be used for the above purpose. The Kuk may use your personal data in the database of the Kuk to send you the most updated information relating to our services, development and the appeal of donation campaigns through various channels such as direct mailing, email, telephone, SMS or facsimile, etc. If you do not wish to receive such materials, please contact Tsui Lam Centre or put a "✓" in the box below and send back to Po Leung Kuk through Tel: (2894 8896) or Fax: (2894 8038)

I do not wish to receive any promotion materials from Po Leung Kuk as specified above.

申請人簽署
Signature of applicant: _____

日期
Date: _____