

## VOLUNTEER APPLICATION FORM (Confidential)

Personal Particulars & Contact Information (Kindly attached a copy of your IC)					
Name on NRIC/Passport (Dr/Mr/Mrs/Mdm/Miss)			Address		
NRIC/FIN No.			Email	Home No.	Mobile No.
Gender	Date of Birth	Office No.			
Race		Citizenship	Religion		Marital Status
Occupation History (beginning with most recent)					
Current Organization			Current job title		Employment period To
Brief description of current responsibilities at work					
Previous Organization			Last job title		Employment period To
Brief description of responsibilities at work					
Education, Skills & Experience					
Highest Education Qualifications <i>(include area of studies when applicable)</i>		Institution		Other Certificates / License / Skills	
Proficient Written Languages		Languages / Dialects Spoken		Interest / Hobbies / Special Skills & talents	
Previous voluntary work experience & organization volunteered with					
Your motivation to volunteer is					
Share with us your abilities and personalities you believe could help you be a volunteer					
Church Involvement (if applicable)					
Accepted Christ since (Year)		<i>For those from Trinity Christian Centre</i>			
Church attending		Worship: <input type="checkbox"/> Adam <input type="checkbox"/> Paya Lebar			
since (Year)		District: _____			
		<input type="checkbox"/> Cell Name: _____ <input type="checkbox"/> Not in Cell			
		Leader's Name: _____			
You have come to know about our volunteer programme through:					
<input type="checkbox"/> Friends <input type="checkbox"/> Our website: <a href="http://www.carecom.org.sg">www.carecom.org.sg</a> <input type="checkbox"/> CCSS Recruitment Exercise <input type="checkbox"/> Others (please specify) _____					



### Declaration and Consent

- All the information I have given above is correct. I understand that the selection to be a volunteer is subjected to the consideration of Care Community Services Society.
- I do hereby give Care Community Services Society permission to inquire into my educational background, references, driving record, police records, employment, and/or volunteer history. I further give permission to the holder of any such records to release the same to Care Community Services Society. I do hereby hold Care Community Services Society harmless from any liability, whether civil or criminal that may arise as a result of the release of this information about me. I further hold harmless any individual, agency, business, or corporation that provides information or documents to Care Community Services Society. I understand that Care Community Services Society will use this information as part of its verification of my volunteer application and periodically for evaluation purposes.
- Care Community Services Society has the right to the collection and use of my personal images by photography or video recording for the use of any publicity for Care Community Services Society. The material will not be sold or used in any manner other than for publicity for Care Community Services Society.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Application Date

### Thank You for your time

Kindly return the completed form to:

Ms Daryl Lee  
Community Partnership Team  
Tel: 6304 7604 Fax: 6743-9950  
Email: [daryllee@carecom.org.sg](mailto:daryllee@carecom.org.sg)  
Website: [www.carecom.org.sg](http://www.carecom.org.sg)

### For Office Use

Assignment	Placement Date
Remarks	