

Volunteer Application Form

Contact Information

Full Name (according to NRIC / Passport)	
NRIC No.	
Address	
Date of Birth	
Contact No.	
E-mail Address	
Occupation	
School/Employer	

Availability

Tell us how frequent you are able to volunteer.

- Weekly Fortnightly
 Monthly Ad-hoc basis

Tell us how long you can volunteer with us.

- 1 year More than 1 year

Interests

Tell us in which areas you are interested in volunteering

- Tutoring youths
 Hotline counselling
 Events planning and execution
 Fundraising
 Administration
 Newsletter production
 Volunteer coordination

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from school / employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Summarize your previous volunteer experience.

For volunteering with Education Programme

Write down the subjects and levels that you are able to teach.

Person to Notify in Case of Emergency

Name	
Relationship to you	
Contact No.	

Declaration

Have you ever suffered or are you suffering from any physical impairment, disease or mental illness which might prevent you from competently and safely delivering your service as a volunteer?

___ Yes ___ No If yes, please elaborate:

Agreement and Signature

By submitting this application, I certify that the above information is true and accurate to the best of my knowledge. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

I also consent to CampusImpact:

- collecting the personal data in this Volunteer Application Form and using it for the purpose of deciding whether or not to accept me as a volunteer to CampusImpact, and
- if I am accepted, using and disclosing such personal data for the purpose of managing and scheduling my voluntary duties and responsibilities.

(Please tick the following if ok):

I consent to CampusImpact using my personal data to send me information about its events and activities, including its fundraising events and activities.

Name (printed)	
Signature	
Date	



Contact us @ 6482 1324
Blk 151, Yishun St 11 #01-26 S (760151)
Visit us @ <http://www.campusimpact.org.sg>
<http://www.facebook.com/campusimpact.sg>

For official use

Date received	
Interview date	
Outcome of interview	Accepted / Rejected / KIV: _____ <i>(All KIV forms to be kept for 1 year & must be destroyed thereafter.)</i>
Programme joined & date	
Date of screening sent	
Date of screening results received	
Screening results	Cleared / Not cleared