



何明華會督協會暨社區中心
Bishop Ho Ming Wah Association and Community Centre
Registered Charity No. 290398

Volunteer Application Form

Personal / Contact Details			
*Title:	*Surname:	*First Name:	Preferred Name:
*Address:			
*Contact No 1:			Contact No 2:
*Email:			
Date of Birth:			*Nationality:
* Current Work Status:	<input type="checkbox"/> Work <input type="checkbox"/> Study <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Retired <u>Details:</u>		
	<input type="checkbox"/> Work <input type="checkbox"/> Study <input type="checkbox"/> Full time <input type="checkbox"/> Part time <u>Details:</u>		
Emergency Contact Details – please provide at least one emergency contact			
*Name:			
*Relationship to you:			
*Contact No:			
Name:			
Relationship to you:			
Contact No:			
Referees – please provide contact details of two referees			
*Name:			
*Organisation:			
*Relationship to you:			
*Contact No:			
*Name:			
*Organisation:			
*Relationship to you:			
*Contact No:			

* Compulsory fields

Experience and Qualifications

Please tick any of these skill areas if they relate to you:

- | | |
|--------------------------------------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Administration and clerical | <input type="checkbox"/> Arts and crafts |
| <input type="checkbox"/> Befriending | <input type="checkbox"/> Cooking |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Facilitation |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> IT & computer skills |
| <input type="checkbox"/> Languages | <input type="checkbox"/> Organisation & leadership |
| <input type="checkbox"/> Practical (DIY, shopping, cleaning) | <input type="checkbox"/> Singing |
| <input type="checkbox"/> Tai Chi & other forms of health improvement exercises | |
| <input type="checkbox"/> Others, please specify | |

Experience as a Volunteer	<i>Please give the name of organization, your role and the period you were/are involved.</i>
Education	<i>Please give the highest education qualification, name of provider and the year achieved:</i>
Courses or Training (if relevant)	<i>Please give the training you have undertaken within the last 5 years.</i>
<i>Hobbies and Interests</i>	
<i>Why would you like to be a volunteer with us?</i>	

<i>Do you have any constraints or resources required that we need to be aware of?</i>
<i>Do you have a valid DBS Certificate?</i>
<i>Please indicate particular days or times that you are free to work for us.</i>

By signing this form,

1. I confirm that the information provided is true and accurate.
2. I understand that submitting this application form does not automatically register me a volunteer but that there is a selection process (including completion of satisfactory reference check).

Name:

Signature:

Date:

Privacy Statement

Here at Bishop Ho Ming Wah Association and Community Centre, the protection of personal privacy is an important concern to us. The personal information on this form is being collected for the purposes of recruiting and selecting volunteers wishing to work in the Homework Club. The information may also be used for evaluation purposes. No individual volunteers will be identified by name in any evaluation reports. For more information about how we look after your personal data, please contact us at enquiry@bhmwa.com

Thank you for your interest. The Association may wish to inform you about the news of the Association and upcoming events. If you consent to receive these materials from us, please tick the following boxes:

Newsletters Invitation to events Fundraising & promotional letters

The Association may arrange for photographs and videos to be taken of our activities and publish on our newsletters, website or social media channels to promote the Association. If you consent to your image being used by the Association in this way, please tick