



技能認識：(「技能」是指對某一項技術有所掌握，能應用於服務上。)

電腦軟件操作

- WINWORD  
 FOXPRO  
 POWERPOINT  
 CORELDRAW  
 EXCEL  
 中文打字  
 其他(請列明)

家政

- 美容  
 理髮  
 烹飪  
 編織  
 縫紉  
 手工藝  
 其他(請列明)

專門技術

- 駕駛(持有效證書)  
 家居維修  
 木工  
 水電工(持有效證書)  
 其他(請列明)

美術設計

- 書法  
 美術設計  
 攝影  
 其他(請列明)

語言

- 普通話  
 潮語  
 福建  
 英語  
 其他(請列明)

醫療護理(持有效證書)

- 急救  
 拯溺  
 醫療護理  
 其他(請列明)

其他

- 編輯  
 司儀  
 其他(請列明)

\*可提供義務工作的時段：(請✓或註明時間)

1. 全年

2. 時段：\_\_\_\_\_年\_\_\_\_\_月\_\_\_\_\_日至\_\_\_\_\_年\_\_\_\_\_月\_\_\_\_\_日

	星期一	星期二	星期三	星期四	星期五	星期六	星期日
早上(06:00 - 11:59)							
下午(12:00 - 18:00)							
晚上(18:01 - 23:59)							

從何得知本服務(如從社工或其他同工得知, 請註明其姓名及所屬中心)

義工同意書簽署

義工必須提供個人資料，供本會安排義務工作。義工的資料將被保密處理及只會在轉介義工服務時，提供予有關員工及 / 或受助人士，如義工欲查閱個人資料紀錄，可向本會個人資料主任作書面申請。

義工在提供義務工作前或期間，只可將所得的服務使用者的個人資料用於所同意的目的上。一旦所同意的目的達到後，有關的個人資料必須儘快刪除。

義工必須遵守香港居留及入境處法例方可申請成為本會義工。

\*申請人

\*如申請人滿 18 歲以下人士

申請人簽署

請家長/監護人簽署

簽署日期: \_\_\_\_\_

簽署日期: \_\_\_\_\_

推薦社工備註 (如有) :

最新登記日期: \_\_\_\_\_ 分會負責人簽署: \_\_\_\_\_

填妥表格後，連同近照一張，送/寄交相關分會/ 或中央義工服務負責人。  
中央義工服務統籌地址: 香港西營盤第一街 80 號 A 西園, 香港家庭福利會  
電話: 27711891 傳真: 28110806 電郵地址: volunteer@hkfws.org.hk

## Volunteer Registration Form

Reg. Date: \_\_\_\_\_

Reg. No.: \_\_\_\_\_

Date of First Contact.: \_\_\_\_\_

Registration year: 20/21/22

The personal particular and information collected are used to facilitate the matching of volunteer service. The Society has developed guidelines in accordance with the Personal Data (Privacy Ordinance) to protect your data. Without your consent, we will not use the data for the selling or promotion of service. The Society will update the collected information on every 1st of January. If you would like to be our volunteer again, please kindly contact our staff on or before this date for renewing your status, thank you.

## \*Required Field

\*Name: (Mr./Mrs./Miss) \_\_\_\_\_

\*Sex \_\_\_\_\_ \*Age:  Below 16  16-20  21-30  31-55  56 or above

Address \_\_\_\_\_

Tel. No. (Home) \_\_\_\_\_ E-mail Address \_\_\_\_\_

\*Tel. No.  
(Contact) \_\_\_\_\_

## \*STATUS

 Student  Housewife  Employed  Unemployed  Retired  
 Others \_\_\_\_\_

## EDUCATION LEVEL:

 Primary  S1-S3  S4-S7  Tertiary  University  
 Would like to join as Family Volunteer (i.e. to participate with family members)

Vol. Training:  No  Basic Training  Skill Training  
 Vol. Experience:  No  Less than 1 year  1 to 3 years  3 years or above  
 I belong to HKFWS \_\_\_\_\_ Centre Volunteer Group.

## \*AGE RANGE OF SERVICE TARGETS (Can choose more than one)

 All  Children (0-12)  Youth (13-25)  Adult (26-59)  Elderly (60 or above)

## \*SERVICE NATURE (Can choose more than one)

 Clerical  Tutorial  Research  Medical  
 Skill  Visit  Art  Editing  
 Escorting  Recreational  Child care  Home Help  
 Befriending  Physical Labour  
 Others \_\_\_\_\_

## \*SERVICE DISTRICT (Can choose more than one)

 HK Central & Western  Wanchai  HK Eastern  Islands  Others  
 Yau Tsim Mong  Kowloon City  Shamshui po  Kwai Chung & Tsing Yi  
 Kwun Tong  Tseung Kwan O  Yau Tong  Tuen Mun

**SKILLS**

- WINWORD
- FOXPRO
- POWERPOINT
- CORELDRAW
- EXCEL
- Chinese Typing
- Others

- Cosmotology
- Hair Cutting
- Cooking
- Knitting
- Needle Work
- Handicraft
- Others

- Driving
- Household
- Carpenter
- Water & Electricity (with license)
- others

Art and Design

- Calligraphy
- Art & Design
- Photography
- Others

Language / Dialect

- Mandarin
- Chiu Chau
- FuJian
- English
- Others

Nursing (Recognized)

- First Aid
- LifeGuard
- Nursing
- Others

Others

- Editorial
- M.C.
- Others

\*Time available (Please  or specify the time)

1.  Whole Year

2.  From (yy/mm/dd): \_\_\_\_\_ To \_\_\_\_\_

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
a.m. (06:00 - 11:59)							
p.m. (12:00 - 18:00)							
Evening (18:01 - 23:59)							

Source of referral (If you are recommended by social worker or colleagues, please specify his/her name and center) :

\_\_\_\_\_

**Volunteer Consent Signing**

Volunteers should supply their personal information to Hong Kong Family Welfare Society for arranging volunteer service. The personal data will be kept confidential and will only be disclosed to related staff and / or service users. If the volunteer want to access the data kept by us, he or she should make written application to our Personal Data Coordinator.

Before or during the delivery of Volunteer Service, volunteer is restricted to use the service users' personal data on the agreed purpose only, and requested to delete it as soon as the original objective of using the data is reached.

Before applying for volunteer registration, volunteer should observe the law of Hong Kong Government and Immigration regulation for volunteer service.

\*Volunteers' Signature : \_\_\_\_\_ Date of signature: \_\_\_\_\_

Volunteers aged under aged 18 are suggested seeking the consent from parents or guardian

\*Parent/ guardian signature: \_\_\_\_\_ Date of signature: \_\_\_\_\_

Social worker's remarks (if any) \_\_\_\_\_

\_\_\_\_\_

Updating registered Date:

Centre responsible staff signature:

\_\_\_\_\_

\_\_\_\_\_