

澳門志願者註冊表格(個人)

Registration form of Macao Volunteers (Individual)

此表格適用於註冊成為澳門志願者的申請。申請者須遵守澳門志願者有關的註冊 規章及制度。如申請者未滿十六歲,還須經父母或監護人書面同意。註冊澳門志 願者所享有的福利、權利和義務等詳情請參閱志願者手冊。

This form is used for application for registration as a Macao Volunteers. Applicants must abide by the corresponding rules and regulations. Endorsement by parent or guardian is required for the applicants under the age of 16. Please refer to the Handbook for the benefits, privileges, obligations and other details of Macao Volunteers.

近照 (photo)

| | | | 個人資料 | PERSONAL DE | TAILS | | | |
|--|-------------------|-----------------------------------|--|--------------------|---------------------------------|-------------------------------------|---|------------------------------------|
| 中文姓名* (Chinese name) | | | 外文姓氏 * (Name in other lan | guage - Last nam | e) | 外文名字* (Name in oth | er language - First / | other names) |
| 性別 * (Gender) | □ 男(M) | □ 女(F) | 出生日期* _ (Date of birth) | 年(y) | 月(m)目(a | (The form is | ·六歲者須具父母或 required to counter te applicant is under | sign by parent or |
| 證件類別 * (Type of ID) | 身份證: (ID Card) | □ 澳門(Macao) □ 香港(HK) □ 內地(China M | 其他: (Others) | | | 證件號碼 * (ID number) | | |
| 國籍 * (Nationality) | | Fare(Cum 19 | 手機號碼* (Mobile number) | | | 其他聯絡電記 (Other contact | | |
| 電子郵箱 (Email) | | | 聯絡地址 * (Correspondence ad | ddress) | | | | |
| 職業 * (Occupation) | | | 就讀學校 (School / institution attending) 任職機構 (Name of firm) | | 部門及職位 | (Major / faculty and year of study) | | |
| | □ 退休(Ret | | □ 其他: (Others) | | | | | |
| 教育程度 (Education level) | | | □ 大專或大學畢業 (College or Undergraduate) | | □ 碩士或博士 (Postgraduate) | | | |
| 掌握語言 中文/廣東話(Cantonese) (language spoken) | | | □ 中文/普通話(Mandarin) □ 英文(English) | | □ 葡文(Portuguese) □ 其他: (Others) | | | |
| | | | 志願服務經驗 VO | | | 可另紙書寫。you | ı may use a separate | sheet if needed.) |
| 參與團體或機構 (Organization joined) | | 職位 (Position) | | 服務內容 (Services) | | 年資 (Years of services) | 服務時數 (Hours of Volunteering) | |
| | | | | | | | | |
| 是否曾參與國際 (Have you been a | volunteer in an | 务? international event?) | □ 是(Yes) □ | 否(No) | | | | |
| 活動名稱 (Name of event) | | | 舉行日期 (Date of event) | | 服務崗位 (Position) | | 地區 (Place of event) | 服務時數 (Hours of Volunteering) |
| | | | | | | | | |

志願服務意向 VOLUNTEERING INTENTION 能參與服務的時間(可多撰) □ 平日日間 □ 平日夜間 □ 假日 (Time available, multiple selections) (Day times of week days) (Night times of week days) (Weekend / Holiday) 任何時間 時間待定 (Anytime) (To be confirmed) 服務對象選擇(可多選) □ 兒童 □ 青少年 □ 長者 (Service targets, multiple selections) (Children) (Youth) (Elder) □ 傷殘人士 家庭 □ 智障人士 (Family) (Disabled) (Mentally handicapped) □ 政府 □ 非牟利團體 □ 沒意見 (Non-profit organization) (Never mind) (Government) 有興趣參與的服務類型(可多選) □ 社區服務 □ 長幼及弱勢關懷 □ 家居清潔/維修 (Services interested in, multiple selections) (Social service) (Caring) (Cleaning / repairs) 組織策劃 □ 大型活動 □ 扶貧探訪 (Organization & Planning) (Poverty alleviation & visiting) (Events) □ 文化創意及藝術 □ 培訓教學 研究調查 □ 宣傳推廣 (Culture, Creative & Arts) (Research & Survey) (Training) (Promotion & Advertising) □ 旅遊嚮導 □ 體育服務 □ 醫療/護理 □ 禮儀接待 (Tourism docent) (Sports) (Medical / health) (Etiquette reception) □ 網頁設計/多媒體 法律/翻譯 環保服務 編輯出版 (Web design / multi-media) (Legislation / translation) (Environment protection) (Editing & publishing) □ 其他: (Others) 個人資料收集聲明 PERSONAL DATA COLLECTION STATEMENT 申請者應填寫註冊表格上所需的資料,資料不足或會導致有關申請無法處理。申請者所提供的資料將受到保密,在註冊批核後會成為志願者的個人檔案紀錄,並 只適用於開展志願服務、聯絡及通訊之用,除獲授權的人士外,將不會提供予其他人士。志願者有權確定其個人資料的保存、索取該等資料的副本,以及更改任 何不正確的個人資料。有關情況可向澳門志願者總會秘書處提出書面申請,聯絡方式包括傳真:(853) 28356429;電郵:macauvolunteer2012@gmail.com。 Applicants should provide the data required by the Registration form, otherwise the application might not be able to process. The data will be kept confidential, and will be transferred to the volunteer file established once the application is successful, and will only be used for volunteering and services, promotion of activities, and communication purposes. Apart from personnel duly authorized, no one will be given access to your personal data. Volunteers have the right to ascertain whether his/her personal data is held, or to obtain a copy of such personal data, and to have any inaccuracies corrected. These requests should be made in writing and addressed to the secretariat of General Volunteers Association of Macao by fax: (853) 28356429 or email: macauvolunteer2012@gmail.com. □ 是(中文) □ 是(英文) □否 是否願意接收電郵訊息? 是否願意接收手機訊息? □ 是(中文) □ 是(英文) (Yes - Chinese) (Mobile SMS receiving?) (Yes - English) (Yes - Chinese) (Yes - English) (Email message receiving?) (No) (No) 欲加入的志願者協會(分會) WILLINGNESS TO JOIN THE VOLUNTEERS ASSOCIATION* □ 文創藝術志願者(Cultural Creativity and Arts Volunteers) □ 青年志願者(Youth Volunteers) □ 愛心志願者(Loving Care Volunteers) □ 博彩從業員志願者(Gaming Practitioners Volunteers) □ 教師志願者(Teachers Volunteers) ■ 醫護志願者(Medicals Volunteers) □ 環保志願者(Environment Protection Volunteers) □ 其他(Others): 聲明 DECLARATIO N* 本人認同志願者的理念,並希望註冊成為澳門志願者,服務社會。本人 現聲明本註冊表格上所填寫內容均屬真確,同時已清楚及同意表格上所 載關於個人資料收集聲明的內容,並同意註冊成為澳門志願者後,當遵 守有關的註冊規章及制度。 I agree with the principles and values of being a volunteer, and I am eager to register as a volunteer to serve the community. I hereby declare that all data given in this registration form are accurate and complete. I understand and agree with the contents of the Personal Data Collection Statement as

detailed in this form. And I consent that if registered, I will conform to the corresponding rules and regulations.

申請者簽署(Signature) 日期(Date)

| 父母或監護人 PARENT OR GUARDIAN | | | | | | | |
|--|----------|--|--|--|--|--|--|
| 未滿十六歲的申請者須具父母或監護人 (The form is required to countersign by pu under the age of 16.) | *701 🗀 | | | | | | |
| 與申請者之關係(Relationship) | 電話(Tel) | | | | | | |
| 父母或監護人簽署(Signature) | 日期(Date) | | | | | | |

此欄由澳門志願者總會填寫 FOR OFFICE USE ONLY

經手人: 審批人: 收表日期: 註冊號碼:

澳門志願者總會保留接納申請與否的最終決定權。

General Volunteers Association of Macao reserves the right of final approval of the applications.

本註冊表格複印有效。

Photocopies of this Registration Form are accepted.

澳門志願者總會 General Volunteers Association of Macao

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Avenida de Venceslau de Morais n.º 218, Edf. Diário Ou Mun Iat Pou 12 andar, Macau

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