



VOLUNTEER APPLICATION FORM

义工报名表

Photo
照片

Please fill up this short questionnaire and update your particulars.

请回答以下的简单的问题与填写个人资料。

1. When did you first come to Thekchen Choling? 您是哪一年开始来到与参与大乘禅寺的活动?

Month/Year 月/年: _____

2. How did you know about Thekchen Choling? 您是如何认识大乘禅寺的?

- Tccl website/ facebook/ internet 网页/脸簿/网络
- Recommendation from family and friends 朋友与家人的介绍
- Newspaper 报纸广告
- Street posters 招贴广告
- Walk in 路过寺庙
- Others其他 Please specify请注明: _____

3. Have you attend the temple's orientation program before? 您参加过寺庙举办的迎新会吗?

Yes 是 / No 否

4. I would like to offer my services in the selected areas indicated below. Please tick.

我希望在以下的范围提供我的服务。(请选择。)

Event Support 活动护持

- Administration Support 行政工作
- Logistics 场务策划
- Kitchen Helper 厨房助手
- First Aid 急救护理人员
- Photographer 摄影师
- Videographer 录影师
- Audio & Visual Support 音响及摄像助理

Community Outreach 社区活动

- Ration distribution 礼包分派
- Organize community activities 组办社区活动
- Healing Services (TCM / Reiki practitioner) 医疗服务 (中医师/ 推拿师/ 灵气治疗员)

Dharma Education 佛法教育

- Transcribing of Teachings 佛法誊写
- Dharma Publication 弘法刊物
- Youth Development 少年活动
- Dharma Junior Teacher/ Assistant Teacher 儿童佛学班教师/助教
- Translation 翻译员

Temple Support 寺庙护持

- Graphics Design 平面设计
- Website Design 网页设计
- Temple Cleaning & Maintenance 寺庙清理与维修
- Front desk Service 前台服务

5. Hobbies/ Interests/ Skills 消遣/兴趣/才艺:

6. Please kindly indicate the preferred day /time that you can volunteer 请选择您能服务的时间:

Day日: _____ Time时间: _____

Personal Information 个人资料

Name 姓名 (as in NRIC/Passport):		Chinese Name 中文名:	
NRIC No. / Passport 身份证:		Race 种族:	
Date of birth (DD/MM/YY) 出生日期 (日/月/年):		Contact no. 联络号码:	
Nationality 国籍:		Email 电邮:	
Address 地址:			Gender 性别: M 男 / F 女
Occupation 职业:		Place of Work 工作地方:	
Marital Status 婚姻:	*Single 单身 / Married 已婚 / Divorced 离婚者	Driving Licence 驾照: Owns a car 拥有汽车:	Class *2 / 3 / 4 Yes / No
No. of Children 孩子次数:		Age of Children 孩子的年龄:	
Education 学历: <input type="checkbox"/> Primary 小学 <input type="checkbox"/> Secondary 中学 <input type="checkbox"/> Pre-U 高中 <input type="checkbox"/> Tertiary 大专	<input type="checkbox"/> Post Grad 研究生 <input type="checkbox"/> Others (Pls specify) 其他 (请注明) : _____ _____	Language Proficiency 语言能力: Spoken: Written:	

* Please delete accordingly. 请适当的删除。

Connect with Us! 与我们联系

Tick in the given boxes and sign 请打勾与签名:

1. I give consent to receive updates on events and activities by the following:

我愿意以以下方式获得寺庙活动的消息:

- English SMS 电话短讯 (英语) or 或
 Chinese SMS 电话短讯 (华语)
 Chinese Chanting SMS group 助念团
 Mailed Brochures 邮寄手册

2. I confirm and agree that the personal data I am requested to provide in this form is collected by Thekchen Choling (Singapore) for purposes of registration, audit, events and marketing communications, meeting any other legal and regulatory obligations, and may be used, disclosed or otherwise processed accordingly. The personal data will be retained for no longer than is necessary to meet the purposes for which the data is collected, or if longer, for compliance with applicable law, or in accordance with the temple's records retention guidelines. The personal data enclosed herein may be transferred by TCCL SG to its other affiliates and branches.

Yes, I agree 是, 我答应

No, I do not agree 否, 我不答应

3. I shall not hold Thekchen Choling, the staff or organizing members responsible for any damage to or loss of property, any injury, illness or any accidents or mishaps that may happen to me during my voluntary work.

我明白及同意大乘禅寺(新加坡)将无须赔偿或负起任何有关我在义务工作时所发生的任何意外。

Signature 签名

Date 日期

FOR OFFICIAL USE 寺务所专用:

Via Internet

Date of Registration: _____

Received by: _____