

Volunteer Application Form

I am disclosing my personal data and contact information so that I can be contacted for volunteer activities by the Institute of Mental Health (IMH). In compliance with the Personal Data Protection Act 2012 (PDPA), I hereby give consent to IMH Volunteer Programme staff to collect my personal data (below) for the purposes of contacting me for volunteer activities. All information provided in this form will be kept strictly confidential. I am aware that I can withdraw this consent by emailing the IMH Volunteer Programme staff at enquiry@imh.com.sg and that I may provide feedback (concerns, queries or complaints) about IMH's personal data protection policies and practices to The Data Protection Officer at tel: 1800 386 4541.

1. PERSONAL INFORMATION

Name (as stated in NRIC / passport): _____

NRIC / FIN / PPT No: _____ Nationality: _____

Date of Birth: _____ Marital status: _____ Gender: _____

Address: _____ S'pore _____

Tel (H): _____ Tel (O): _____ Mobile phone: _____

Email: _____

Race: _____ Religion: _____

Spoken languages/dialects: _____

Highest education: Secondary College Polytechnic University Others _____

VOCATION/OCCUPATION:

Student

Name of Institution: _____

Working Adult

Occupation and Name of Company: _____

Others

(If you are retired, please state your last job and company) _____

2. EXPERIENCE IN VOLUNTARY WORK (If applicable)

| Organisation | Period of service | Type of voluntary work performed | Name of reference |
|--------------|-------------------|----------------------------------|-------------------|
| | | | |

3. SKILLS

Please list any skills which you can share during voluntary service

4. INTERESTS

Please tick any type of volunteer work that you are interested in. (Tick any that is applicable)

| | |
|--|--|
| <input type="checkbox"/> Art and craft <input type="checkbox"/> Befriending (chatting, cheering patients and playing games) <input type="checkbox"/> Simple exercise /sports and games <input type="checkbox"/> Gardening <input type="checkbox"/> Hair grooming <input type="checkbox"/> Singing and dancing <input type="checkbox"/> Play a musical instrument | <input type="checkbox"/> Social and recreational activities includes outings <input type="checkbox"/> Fund raising / event support <input type="checkbox"/> Support group assistance <input type="checkbox"/> Administrative and reception duties <input type="checkbox"/> Painting <input type="checkbox"/> Pet therapy <input type="checkbox"/> Others _____ |
|--|--|

5. COMMITMENT* compulsory field

Ad Hoc / project basis. Please estimate duration of voluntary service ____months ____more than 1 year

Permanent basis – yearly/ half yearly/ quarterly/ monthly /fortnightly/ weekly

Please tick the slots you are available:

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|--------------------|--------|---------|-----------|----------|--------|----------|--------|
| 10.00am to 12.00pm | | | | | | | |
| 3.00pm to 5.00pm | | | | | | | |

6. How did you come to know of the volunteer programmes?

IMH website Friends Ex-patient IMH newsletter IMH staff Others _____

7. Are you in good health?* compulsory field

Yes No (please give brief details): _____

8. REFERENCE

Please provide one – to exclude family members

| Name | Relationship | Tel (Mobile) | Tel (O) |
|------|--------------|--------------|---------|
| | | | |

9. EMERGENCY CONTACT PERSON* compulsory field

Name: _____ Contact No: _____

10. BACKGROUND INFORMATION* compulsory field

As we consider the safety and security of our patients to be of utmost importance, we appreciate you sharing the following with us:

i. Have you ever been convicted in the court of law in any country?

Yes, please specify: _____ No

ii. Have you ever been treated for any psychiatric disorders?

Yes, please specify: _____ No

I confirm that the information provided on this application is true. I also agree to abide by all Hospital policies and procedures.

Applicant's Signature

Date

| For official use | | | |
|------------------|--|----------------|--|
| Interviewed by | | Interview date | |
| Accepted | <input type="radio"/> Yes <input type="radio"/> No | Remarks | |

Current Volunteer Opportunities

| Volunteer Position | Duties |
|---|--|
| 1. Volunteer for social, recreational and rehabilitative activities | Engage patients in activities both in the ward and outside the hospital such as games, art and craft, singing and dancing, gardening, parties (birthday, festive celebrations) outings to places of interest/ shows/ invitations, hair grooming, simple cooking class, painting, exercises, giving support, work habits, social skills, home management skills |
| 2. Volunteer for hosting events | Assist in hosting events e.g. fund raising, open house, World Mental Health Day, hospital's ad hoc activities |
| 3. Volunteer Guide | Meet and greet visitors / patients, assist the visitor / patient to find their way around the hospital, assist in hosting tours |
| 4. Volunteer for religious activities | Assist to conduct /bring patients of the same faith for religious activities |