



# Cathay Home Care Services

**A.B.N. 62 010 219 397**

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## Volunteer Application Form

Chinese Name: \_\_\_\_\_ English Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Gender:  M  F

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ E-mail: \_\_\_\_\_

Driving License No.: \_\_\_\_\_ Car Reg. No.(if any): \_\_\_\_\_

Visa Type: \_\_\_\_\_ Current Occupation: \_\_\_\_\_

Length of time in Australia / Brisbane: \_\_\_\_\_ Year/s \_\_\_\_\_ Month/s

Language Spoken:  English  Mandarin  Cantonese  Others: \_\_\_\_\_

Qualification:  Primary School  High School  Tertiary  University

Police Check:  Yes  No → Do you willing to get one as required?  Yes  No

Do you have any medical / health concerns?  No  Yes : \_\_\_\_\_

Do you smoke?  No  Yes

Work Experience: \_\_\_\_\_

Volunteer Experience:  No  Yes : \_\_\_\_\_ Years in \_\_\_\_\_

Do you have any experience looking after older people?  No  Yes : \_\_\_\_\_

Interest:  Singing  Dancing  Exercise  Drawing  Chatting  Craft  Chess  Cooking

Others: \_\_\_\_\_

Can you be the Tutor in an interesting Group:  No  Yes  Not Sure

I am interested in:  Kitchen assistant  Activity assistant  Helper in Social Support

Escort for shopping / restaurant  Community Visit

Others: \_\_\_\_\_

Volunteering Pattern:  \_\_\_hrs/week  \_\_\_hrs/fortnight  \_\_\_hrs/month  Others: \_\_\_\_\_

Preferred Days: please √ into the Boxes

|           | Morning | Afternoon | Specified Time (for example: 9am – 3pm) |
|-----------|---------|-----------|---|
| Monday    |         |           |   |
| Tuesday   |         |           |   |
| Wednesday |         |           |   |
| Thursday  |         |           |   |
| Friday    |         |           |   |

Why would you like to volunteer for Cathay?  
\_\_\_\_\_

Are you willing to volunteer for at least once per month?  Yes  No

Are you willing to attend training if required?  Yes  No

|                                     |                    |
|-------------------------------------|--------------------|
| <b>Volunteer's Signature:</b> _____ | <b>Date:</b> _____ |
|-------------------------------------|--------------------|

義工申請表

中文姓名：\_\_\_\_\_先生/太太/女士 英文姓名\_\_\_\_\_

稱呼：\_\_\_\_\_ 性別：男 女

地址：\_\_\_\_\_

住宅電話：\_\_\_\_\_ 手提電話：\_\_\_\_\_

出生日期：\_\_\_\_\_ E-mail：\_\_\_\_\_

駕駛執照號碼：\_\_\_\_\_ 私家車號碼（如有）：\_\_\_\_\_

你的護照類別：\_\_\_\_\_ 現時職業：\_\_\_\_\_

你在澳洲/布里斯本居住了多久：\_\_\_\_\_年\_\_\_\_\_月

能操語言：英語 普通話 廣東話 其他：\_\_\_\_\_

學歷：小學 中學 大專 大學

你有警方無犯罪紀錄書嗎？有 沒有→如有需要，你願意去領取嗎？願意 不願意

你有任何健康關注情況嗎？沒有 有：\_\_\_\_\_

你是吸煙者嗎？不是 是

義工經驗：沒有 有：\_\_\_\_\_年，機構：\_\_\_\_\_

你有任何照顧長者的經驗嗎？沒有 有：\_\_\_\_\_

興趣及技能：唱歌 跳舞 運動 繪畫 談天 工藝 棋藝 廚藝

我有興趣作以下義工工作：廚房助理 活動助理 社交活動助理 購物或飲茶助理

社區探訪 其他：\_\_\_\_\_

可參與義工模式：\_\_小時/星期 \_\_小時/兩星期 \_\_小時/月 其他：\_\_\_\_\_

可參與義工時段：請於方格內√

|     | 早上 | 下午 | 特定時段（如：上午九時至下午三時） |
|-----|----|----|-------------------|
| 星期一 |    |    |                   |
| 星期二 |    |    |                   |
| 星期三 |    |    |                   |
| 星期四 |    |    |                   |
| 星期五 |    |    |                   |

你為何有興趣在國泰會當義工？

\_\_\_\_\_

\_\_\_\_\_

你願意每月最少當義工一次嗎？ 願意 不願意

如有需要，你願意出席訓練課程嗎？ 願意 不願意

|     |     |
|-----|-----|
| 簽名： | 日期： |
|-----|-----|