



CONFIDENTIAL

**PEOPLE'S ASSOCIATION
VOLUNTEER REGISTRATION FORM**

Please paste (do not staple)
one photograph
for PAssion Card

This form may take you 5 minutes to fill in.

PART I

NAME OF COMMITTEE

Name as in NRIC (In **BLOCK** and underline surname)
*Dr/Mr/Mdm/Mrs/Miss

Name in Chinese Character
(if applicable)

NRIC No.

Date of Birth (dd/mm/yy)

Title of National Day Award & Year
Awarded (if any)

Singapore PR *Yes/No/NA

Sex Male Female

Race

Marital Status Single Married
 Widowed Divorced/Separated

NS Status (if applicable)

Full Time
 Reservist
 Exempted

Nationality

Country of Birth

Religion

Language/Dialect
Written _____

Spoken

Highest Educational Level Attained Primary Secondary *GCE 'N'/'O' ITE GCE 'A'

Diploma Pass Degree Honours Degree Master's Degree Doctorate

Name of Diploma/Degree Attained _____

Name of Polytechnic/University Attended _____

Home Address _____

Postal Code _____

E-mail Address _____

Home Telephone No. _____

*Pager/Handphone No. _____

Type of Dwelling HDB _____ - Room

HDB Executive

HUDC

Bungalow

Semi Detached/Terrace

Condominium/Private Apartment

Others, specify _____

PART II

Occupation

Name of *Employer/Company (please specify if you are self-employed)

Workplace Address _____

Postal Code _____

Workplace Telephone No. _____

Fax No. _____

I hereby declare that all entries in this volunteer form are true and correct; and consent to disclose my personal information to the People's Association (PA) and its employees and if necessary, relevant government agencies to facilitate my community work with the PA.

Signature of Applicant

Date

FOR OFFICIAL USE

Position Recommended _____

Endorsed by

Recommended by _____

Name & Designation

Signature & Date

Signature of Adviser & Date

*Delete as necessary

√ Tick wherever appropriate

PA/FS/01/2005

CONFIDENTIAL