

**義工轉介服務 – 義工徵求表**  
**Volunteer Referral Programme – Volunteer Request Form**

此表格適用於義務工作發展局登記機構的義工徵求申請。為使招募更有成效，申請須於**服務舉行前三星期或以上提交**，招募期最長為三個月。所有申請，須經本局審批方可獲接納。This form is for the application of volunteer request of the Volunteer Referral Programme for registered organizations. **This form should be submitted three weeks in advance of the service date.** This application is valid for three months. All applications must be approved for acceptance.

**服務資料 Service Details**

檔案編號(如有) Ref. No. (if any): \_\_\_\_\_

服務名稱 Service Name: \_\_\_\_\_ 服務目的 Objective of Service: \_\_\_\_\_

主要服務性質 Major Type of Service: (只選1項 please choose 1 only) (請在合適的格內✓ Please ✓ as appropriate)

<input type="checkbox"/> 專業支援或顧問 Professional Support or Consultancy	<input type="checkbox"/> 宣傳及公眾教育 Promotion & Public Education	<input type="checkbox"/> 培訓/技能指導 Training & Capacity-building	<input type="checkbox"/> 環保、生態及保育 Environmental protection, ecology and conservation
<input type="checkbox"/> 活動或場地支援 - 康樂 Event or Venue Support - Recreation	<input type="checkbox"/> 活動或場地支援 - 文化藝術 Event or Venue Support - Culture & Arts	<input type="checkbox"/> 活動或場地支援 - 體育 Event or Venue Support - Sports	<input type="checkbox"/> 情緒支援或輔導 Emotional support or Counselling
<input type="checkbox"/> 美術設計 Art & Design	<input type="checkbox"/> 網頁/多媒體設計 Web/Multi-media Design	<input type="checkbox"/> 編輯及出版 Editing & Publishing	<input type="checkbox"/> 文書 Clerical Work
<input type="checkbox"/> 研究或調查服務 Research/Survey	<input type="checkbox"/> 功課輔導 Tutoring	<input type="checkbox"/> 策劃及組織 Planning & Organizing	<input type="checkbox"/> 師友服務 Mentoring
<input type="checkbox"/> 攝影/錄影 Photography/ Videography	<input type="checkbox"/> 籌款 Fund-raising	<input type="checkbox"/> 家居清潔 Domestic Cleaning	<input type="checkbox"/> 探訪 Visitation
<input type="checkbox"/> 護送及照顧 Escort & Caretaking	<input type="checkbox"/> 幼兒照顧 Child Care	<input type="checkbox"/> 醫療或健康護理 Medical or Health Care	<input type="checkbox"/> 家居維修 Home Repairs
<input type="checkbox"/> 體力勞動 Manual Labour	<input type="checkbox"/> 導遊/導賞 Tour-guiding/ docent	<input type="checkbox"/> 翻譯 Translation	<input type="checkbox"/> 其他 (請列明) Others (Please specify): _____

服務日期 Service Date: \_\_\_\_\_ 服務時間 Service Time: \_\_\_\_\_

服務地點 Service Venue: \_\_\_\_\_ 服務次數 Service Frequency: \_\_\_\_\_

義工簡介會 / 訓練 Volunteer Orientation / Training:

有 Yes  無 No (日期 Date: \_\_\_\_\_ 時間 Time: \_\_\_\_\_ 地點 Venue: \_\_\_\_\_)

物資供應 Material Supply: 津貼 Allowance 茶點/膳食 Refreshment/Meals 飲用水 Drinking Water 證書 Certificate 其他 Others: \_\_\_\_\_

**服務對象資料 Service Recipient Details**

服務對象人數 Service Recipient Number: \_\_\_\_\_

主要服務對象類別 Major Type of Recipient: (只選1項 please choose 1 only) (請在合適的格內✓ Please ✓ as appropriate)

<input type="checkbox"/> 兒童 Children	<input type="checkbox"/> 家庭 Family	<input type="checkbox"/> 病人 Patients	<input type="checkbox"/> 智障人士 Mentally Handicapped
<input type="checkbox"/> 青少年 Youth	<input type="checkbox"/> 基層家庭 Grass-roots Families	<input type="checkbox"/> 戒毒人士 Drug Abusers	<input type="checkbox"/> 弱能/肢體傷殘人士 Disabled/ Handicapped
<input type="checkbox"/> 成人 Adult	<input type="checkbox"/> 社區人士 Community	<input type="checkbox"/> 新來港人士 New Arrivals	<input type="checkbox"/> 更生人士 Rehabilitated Inmate
<input type="checkbox"/> 長者 Elderly	<input type="checkbox"/> 市民大眾 The Public	<input type="checkbox"/> 少數族裔 Ethnic Minorities	<input type="checkbox"/> 精神病患及康復者 Mentally-ill and ex-mentally ill
<input type="checkbox"/> 其他 (請列明) Others (Please specify): _____			

**所需義工 Volunteer Requirement**

所需人數 Required Numbers: \_\_\_\_\_ 年齡 Aged: \_\_\_\_\_ 歲或以上 or above 所需技能/資格(如有) Skills/Qualification(if any): \_\_\_\_\_

義工職責 \_\_\_\_\_ 服務備註 Service Remarks: \_\_\_\_\_

教育程度最低要求 小學 中學 大專 學士 碩士/博士

Education Level requirement:  Primary  Secondary  Post-Secondary  Undergraduate Degree  Postgraduate Degree

指定義工轉介 (如希望轉介指定之義工或義工隊，請註明義工姓名/會員編號/義工隊名稱)

Referral of selected volunteers/groups (Please state their names/membership number): \_\_\_\_\_

**機構資料 Agency Details**

機構名稱 \_\_\_\_\_ 於本局之機構登記編號

Name of Agency: \_\_\_\_\_ Agency Registration No. in AVS: RO- \_\_\_\_\_

機構地址 Address: \_\_\_\_\_

服務負責人姓名 Name of Staff (英文 English): \_\_\_\_\_ (中文 Chinese) \_\_\_\_\_ 先生/女士/教授/博士 Mr./Ms./Prof./Dr.

職位 Post Title: \_\_\_\_\_ 電話 Tel: \_\_\_\_\_ 傳真 Fax: \_\_\_\_\_ 電郵 Email: \_\_\_\_\_

徵求義工截止日期 Deadline of Recruitment: \_\_\_\_\_ (最遲須於服務舉行前一星期截止 The deadline should be one week before the service)

**聲明 Declaration**

本人確認已代表申請機構細閱並同意遵守《登記機構須知》的全部條款。本人明白及接受義務工作發展局擁有接納此申請與否的最終決定權。本人同意提供上述資料作申請義工轉介服務之用，並同意在符合《個人資料(私隱)條例》的情況下，義務工作發展局可持有及使用所提供的資料及有關此活動之相片，作宣傳或推廣義務工作之用，而毋須另行取得本機構之同意，或向本機構繳付任何費用。

On behalf of the registration organization applicant, I have read and agreed to abide by the rules and regulations set out in the Notes to Registered Organizations. I understand and accept that the Agency for Volunteer Service has the final decision on the acceptance of this application. I agree to provide the above information for the purpose of this application of the Volunteer Referral Programme. I agree in compliance with The Personal Data (Privacy) Ordinance (the "PDPO"), the Agency for Volunteer Service can hold and use the provided information and activity-related photos for publicity or promotion of voluntary work without the need to obtain the consent of the institution or pay any fees to the institution.

服務聯絡人簽署 \_\_\_\_\_ 機構蓋章 \_\_\_\_\_ 日期 \_\_\_\_\_  
Signature of Staff: \_\_\_\_\_ Agency Chop: \_\_\_\_\_ Date: \_\_\_\_\_

**義工服務中心 Volunteer Action Centre**

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