



個人義工登記表 - Volunteer Registration From

請以正階填寫,並在適用項目填上✓號

(Please fill in the form using BLOCK letters and put a tick where appropriate.)

個人資料 Personal Information

此部分由職員填寫	By Staff
義工編號:	
會員編號:	
輸入資料日期:	

姓名				(中文)				(英文)	性別	男/女	
Name Chinese					English	Gender	Male/ Female				
出生月份 (月/年)			身份	證號碼		(英文	文字母及首四個數字)				
Date	of Month	n (MM/YYYY)				ID N	umber		(Letter	and the first 4 digits)	
地址							電郵				
Addr	ess					Email					
電話	*		(手提)	*世	:號碼可以接	收 WhatsApp 訊息。本人同意中心以 WhatsApp 向我發佈有關資訊。					
Tel. 1	No.*		Mobile	l c	ould receive	WhatsApp	messages.	I agree the	e centre to cont	act me via WhatsApp.	
緊急	聯絡人	Contact Person	on in Ca	se of Em	nergenc	y					
姓名		j	與義工關係	Ŕ		電話					
Nam	е	Relationship with Volunteer			unteer	Tel. No.					
教育	程度 Ec	ducation Leve	·I							_	
						小學程序	Ŧ				
Ш		ow Primary Schoo	ol			Primary					
	1							請註明您	的主修學科		
		ondary School					College or Above, please specify your major				
職業	Occup	pation						•		,	
	•						在學				
		青武内窓印帆未 ed, please specify your occupation						Student			
		上,請註明您退休	•	арашон							
		, please specify yo		ation before	e retireme	nt L	Housemaker				
	其他,註		<u>'</u>			l					
		please specify									
義務	工作興趣	敢 Volunteer li	nterests								
	大型活						中小文	で書支援			
		s Programme						Office Work			
	健康プ	大使 th Ambassador						活動當值			
								Service / Activity Duty			
	同路	人義工,請註明:						社區教育/ 宣傳			
		Il Help Volunteer, please specify:						Public Education / Promotion			
	其他	,請註明:									
	Others, please specify:										
技能											
	運動	,請註明:				跳舞					
		s, please specify				Dancing	İ				
	煮食					資訊科技					
	Cooki	ing				র্লাপন্য Information Technology					
	藝術	,請註明:				其他, 詩		- 5,			
	Art, p	A - t 1				Others, please specify:					
備註 Remarks											
歡迎您提供更多資料讓我們更了解您											
Please feel free to provide further information											
		1			I						





資料保密聲明 Confidentiality Agreement Declaration

義工必須遵從香港政府個人資料(私穩)條例與及基督教聯合那打素社康服務(以下簡稱為本機構)所訂立之資料保密守則如下: It is the obligation of the volunteer of United Christian Nethersole Community Health Service (the "UCN") to strictly comply with the Personal Data Privacy Ordinance of the Government of HKSAR and the following UCN's regulations relating to confidentiality:

- 義工必須適時地向有關負責服務主管申報所有對本機構有影響的資料。
 All information may come to the organization's knowledge during or in the course of fulfilling his/ her obligations during his/ her service which may affect UCN, the volunteer must timely disclose such information to his/ her responsible
 - his/ her service which may affect UCN, the volunteer must timely disclose such information to his/ her responsible officer of UCN.
- 2. 關於<u>本機構</u>內部行政、<u>本機構</u>電腦系統、其服務/業務、病人、服務使用者、案主及職員之資料,義工必須予以保密。 The volunteer shall treat all information about UCN, including its administration, computerised systems, services, and any information relating to UCN's patients, clients, service users and employees in strict confidence.
- 3. 義工 (在服務期間與及離開<u>本機構</u>後)不得在未經<u>本機構</u>書面授權下私自取用,或向第三者披露任何有關<u>本機構</u>內部行 政、本機構電腦系統、其服務/業務、病人、服務使用者、案主及職員資料。
 - The volunteer will not, either during the continuance of his/ her employment with UCN or thereafter, disclose to any person any information about UCN, including its administration, computerised systems and services, and any information relating to UCN's patients, clients, service users and employees, which come to his/ her knowledge during service, except information has already been known to the public.
- 4. 本機構一旦發現任何義工違反本機構保密守則,本機構會要求義工立即終止在本機構之任何服務。
 - UCN will terminate the service with the volunteer if he/ she has violated this Confidentiality Agreement.

本人明白以上資料保密守則及同意切實遵行

I fully understand the terms and condition of the above Confidentiality Agreement and agreed to strictly comply with it at all times.

申請人須知 Note for Applicant

本機構承諾確保義工資料不被外洩或轉移作其他未被本機構准許之用途。

All personal data will be kept confidential and will not be transferred to other organization without our approval.

本人同意基督教聯合打素社康服務收集本人資料的目的,並願意接受義工服務安排。

I agree to the collection of the above personal data by UCN for the purpose of volunteer registration and accept the volunteer arrangement.

本人同意基督教聯合打素社康服務毋須經本人的審查而可使用本人之肖像、姓名、錄音、錄影和訪問作為推廣之用。 I agree that UCN has the right to use my portrait, name, recording, video footage, interview for promotion use.

申請人 Applicant				
姓名				
Name				
簽署				
Signature				
日期				
Date				

負責職員 Staff Responsible	
姓名及職位	
Name and Position	
簽署	
Signature	
日期	
Date	

◆ 填妥表格後請電郵至 <u>info-ktdhce@ucn.org.hk</u> 或寄回/親身交回九龍協和街 130 號基督教聯合醫院 J 座 4 樓觀塘地區 康健站主中心

Please submit the completed form by email (<u>info-ktdhce@ucn.org.hk</u>) or by mail (Kwun Tong DHC Express Core Centre, 4/F, Block J, United Christian Hospital, 130 Hip Wo Street, Kwun Tong, Kowloon

◆ 查詢電話 Enquiry: 3188 0301