



சிவமயம்

ஸ்ரீ சிவ - கிருஷ்ண ஆலயம் SRI SIVA - KRISHNA TEMPLE

31 Marsiling Rise, Singapore 739127

☎ 6368 0030 ✉ admin@srisivakrishnatemple.com

Affix Recent
Passport Size
Photograph

VOLUNTEER APPLICATION FORM

Personal Details

Name as per NRIC/Passport: _____

Nationality: Singaporean
 Others: _____ Singapore PR: Yes / No

NRIC / FIN: _____
(last 3 digits + last alphabet)

Gender: _____ Religion: _____ Date of Birth: _____

Race: _____ Marital Status: _____

Contact Details: Phone: _____ Email: _____

Additional Details

Address: _____
_____ Singapore _____

Educational Level: _____

Occupation: _____

Employer: _____

Language Proficiency: _____

I would like to render Voluntary Services in [Tick the appropriate box/boxes]:

- | | |
|---|---|
| <input type="checkbox"/> Administrative | <input type="checkbox"/> Fund Raising |
| <input type="checkbox"/> Event Support | <input type="checkbox"/> Prasadam Serving |
| <input type="checkbox"/> Crowd Control | <input type="checkbox"/> Temple Washing |
| <input type="checkbox"/> Others (please specify): _____ | |

*Sri Siva Krishna Temple
Volunteer Application Form*

Volunteer Commitment

- Weekday Time: AM / PM
- Weekend Time: AM / PM
- Adhoc Time: AM / PM

Declaration

Have you ever been convicted in a court of law in any country? Yes / No

If yes, please specify: _____

In case of emergency, kindly contact:

Name: _____

Contact No: _____

Relationship: _____

- I declare that all information above is true and correct.
- I sincerely wish to join the Sri Siva Krishna Temple as a volunteer to assist in the temple's activities. I shall always observe and respect Sri Siva Krishna Temple rules and regulations.

Volunteer Signature

Date

FOR OFFICE USE ONLY

Application Received Date: _____

Proposed By: _____
Name of MC Member

Reviewed By: _____
Secretary Date:

Approved/Not Approved By: _____
President Date: