

Please attach a  
recent passport  
sized photograph  
of yourself here

# **SINGAPORE INTERNATIONAL VOLUNTEERS**

**Specialist/Workshop Volunteer**

## **PERSONAL HISTORY FORM**

*Please complete this form and return it to:*

*Singapore International Volunteers Programme  
Singapore International Foundation  
9 Bishan Place  
Level 9 Junction 8  
Singapore 579837*

*Tel: (65) 6837 8728 Fax: (65) 6837 8710*

*E-Mail: [siv@sif.org.sg](mailto:siv@sif.org.sg)*

**PERSONAL HISTORY STATEMENT**

Name:  Title:

(Please underline your surname)

Date of Birth:  NRIC No:  Age:  Female  Male

(Date/Month/Year)

Mailing Address:   
  
  
Postal Code:

(If different from above)

Home Address:   
  
  
Postal Code:

Telephone Home:  Fax:

Work:  Email:

Mobile:  Pager:

Your trade or profession:

**PERSONAL PARTICULARS**

1. Country of birth:  2. Nationality:

3. Race:  4. Religion:

5. Marital Status:  6. Citizenship:

7. Are you a Permanent Resident of Singapore? Yes  No

**EDUCATION AND TRAINING**

Please list all educational, professional or vocational training that you have undertaken.  
(Start with the most recent)

Date (From – To)	Institution of learning on Professional Body	Title of Qualifications	Full or Part-time
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.....	Completed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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.....	Completed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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.....	Completed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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.....	Completed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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**WORK HISTORY**

- Please list your three most recent positions, starting with your most recent position. **Please also include an updated and detailed curriculum vitae.**

Name and address of employer	Date (month/year): From     /     to     /
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Position title and key responsibilities

Name and address of employer	Date (month/year): From     /     to     /
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Position title and key responsibilities

Name and address of employer	Date (month/year): From     /     to     /
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**Confidential**

.....  
Position title and key responsibilities  
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**SKILLS AND INTERESTS**

Have you had any experience volunteering in Singapore or overseas? If yes, please give details

*Start with the most recent*

Volunteer Organisation	Position Held	From (dd/mth/yr)	To (dd/mth/yr)	Specific Responsibilities
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**LEGAL ISSUES**

Have you ever been convicted of an offence or felony in any criminal proceedings? Yes  No

If yes, please give details in a separate piece of paper.

Have you ever been charged with or had any complaint made against you for sexual or other offences against children? Yes  No

Have you ever been found guilty of dishonest behaviour in any disciplinary proceedings conducted by an employer? Yes  No

Have you ever been suspended or deregistered from any professional society or organization? Yes  No

**Confidential**

If yes, please give details on a separate piece of paper.

**HEALTH**

Do you have a history of, or any current health condition/s that could affect your ability to fulfill your duties as a Specialist/Workshop volunteer?

Yes  No

If yes, please give details:

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Do you have any allergies that we should know about?  
If yes, please elaborate.

Yes  No

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**PERSONAL STATEMENT**

Please state your reason for wanting to be a Specialist/Workshop volunteer.

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**DECLARATION**

**Confidential**

I certify that to the best of my knowledge the information supplied by me in this form is complete and correct.

Signature: .....

Date: .....

**Before returning this form, please ensure that you have:**

- **Answered all the questions on this form**
- **Attached a passport sized photograph**
- **Enclosed a copy of your updated curriculum vitae**
- **Signed and dated this form**

All information will be kept confidential. Should you have any questions regarding the Personal History Form or the SIV Programme, please feel free to e-mail us at [siv@sif.org.sg](mailto:siv@sif.org.sg)



**Singapore  
International  
Foundation**  
for a better world

Website: <http://www.sif.org.sg>