



---

Community Partnership Application Form (Organisation / Group)

Dear Prospective Community Partner,

Thank you for your interest! We would be happy to have you engaging with our seniors at St Joseph's Home and are heartened that you have chosen to us to spend your time with.

Different organisations and groups approach us for different reasons – some to fulfil their company's corporate social responsibility requirements, others to gain meaningful experiences or for spiritual purposes.

To help you decide if St Joseph's Home is indeed the right place for you, kindly complete our screening tool before continuing with this application.

Once you have completed the tool and are certain that we are the place for you, do take a look at our list of volunteer opportunities on our website for more details.

**Important notes**

If you plan to volunteer as an individual, please fill out the application form for individuals.

If you are an organisation or group leader, who is applying on behalf of your organisation or group, please fill up this application form and email it back to us.

We encourage all organisations and groups to consider adopting specific projects, which your members can then directly work on with our residents. If there are more members in your group, you may consider taking turns or alternate amongst yourselves to keep the project going. Preferably this should be on a regular, long-term basis (at least 8 hours a month for over a year). This is so that there is time for your members to get to know the seniors and vice versa, thus enabling fulfilling relationships to be cultivated.

For organisations or groups who are able to contribute in ways other than direct volunteering, please indicate this in the application form below. There may be different requirements for other forms of volunteering depending on the nature of the project.

After you have completed and submitted the application form, do schedule a chat with us prior to the volunteering start date. This is to give us a chance to understand your needs and aspirations so we can better tailor opportunities for you.

Feel free to contact us at [volunteer@stjh.org.sg](mailto:volunteer@stjh.org.sg) or 6268 0482 if you have any questions.

We look forward to welcoming you!

Community Management Team  
St Joseph's Home



Community Partnership Application Form (Organisation / Group)

Please fill up the form accordingly and email it back to us at [volunteer@stjh.org.sg](mailto:volunteer@stjh.org.sg).  
All information provided will be kept in strictest confidence.

**SECTION 1: KEY INFORMATION CONTACT DETAILS**

\*Please circle as appropriate

<b>Name of Organisation / Group:</b>	
<b>Address:</b>	<b>Organisation / Group website or social:</b> (if any)
<b>What does your Organisation / Group do?</b>	
<b>What is the size of your entire organisation / group?</b>	
<b>Salutation of Key Contact Person:</b> *Ms / Mrs / Mdm / Mr / Dr	
<b>Full Name:</b> (underline surname)	
<b>Contact number: (Organisation)</b>	<b>(Mobile)</b>
<b>Email:</b>	
<b>What are the types of Community Partnerships would you prefer?</b>	
<input type="checkbox"/> Single Visit	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Project-Based (e.g. engaging our residents and staff with activities)	<input type="checkbox"/> Advocacy (e.g. campaigning for our cause and care philosophy)
<input type="checkbox"/> Skill-Based (e.g. photography, content creation, cooking)	<input type="checkbox"/> Event Planning (e.g. tailor events specific to needs of the home)
<input type="checkbox"/> Pro-Bono Services (e.g. HR consulting, legal advice, providing therapy)	<input type="checkbox"/> Extending Resources (e.g. free use of meeting or training rooms)
<input type="checkbox"/> Others (please specify):	
<b>If you checked "Single Visit" above, please indicate 2 preferred dates:</b>	
1 <sup>st</sup> Choice: _____ (DAY/DD/MM/YY)	
2 <sup>nd</sup> Choice: _____ (DAY/DD/MM/YY)	



Community Partnership Application Form (Organisation / Group)

**How long do you intend to volunteer with us?**

**Frequency:** \* Weekly / Fortnightly / Monthly / Ad hoc / Once or twice a year

**Duration:** \* Less than 1 month / 1-3 months / 4-6 months / 1 Year / >2 Years

**Preferred Day:**

Weekday (Pls specify): \_\_\_\_\_

Saturday

Sunday

**Preferred Time:**

9.30am – 11.00am

2.30pm – 4.30pm

**Expected group size:** \_\_\_\_\_

**Age range of members:** \_\_\_\_\_

**Proposed activities:** (Please provide as detailed a programme as possible. Priority will be given to those with a clear idea of what they hope to achieve and whose activities are meaningful to the seniors.)

**SECTION 2: ABOUT THE ORGANISATION / GROUP**

**Is this your first time volunteering?** \* Yes / No

**If no, please share more about your past volunteering experience(s).**

Organisation name	Period of service	Description of volunteer work

**Are you familiar with the type of residents living in our home and the care they receive?**

\* Yes / No

(If no, please visit [www.silverpages.sg](http://www.silverpages.sg) to find out more before completing this form. This is also to help you decide if St Joseph's Home is the best place for you)



Community Partnership Application Form (Organisation / Group)

**Please give a brief description of your group.** (e.g. goals and objectives of the group, frequency of meeting, profile of its members, etc)

**How did you know about St Joseph's Home?**

**Why did you choose St Joseph's Home? Was there something specific about our home or programmes?**

**Objective of Visit:**

- Fulfil CSR goals
- Fulfil other requirements (Please specify): \_\_\_\_\_
- Others (Please specify): \_\_\_\_\_

**Languages spoken:** \*English / Mandarin / Malay / Tamil / Dialects (please specify) / Others (please specify):

**What skills and/or abilities do members of this group have that you think would be useful for volunteering with seniors?**

**Any other comments?**



---

Community Partnership Application Form (Organisation / Group)

**Declaration**

I declare that the information provided in this application is true and correct. I agree that failure to disclose any material fact or falsifying information may result in the termination of the Community Partnership with St Joseph's Home.

I confirm that I agree and understand that the information may be disclosed to any party within St Joseph's Home (STJH) or to Catholic Welfare Services (our parent organisation) with purpose for application and proper interest to volunteer work and will indemnify STJH from any liability whatsoever for supplying such information under the specified circumstances.

I understand that STJH requires parental consent for volunteers below the age of 16. If my group involves members below the age of 16, I or the organisation that I work for, are responsible for supervising them during the volunteer work.

I agree to observe the rules, policies and procedures, concerning expected conduct from volunteers, and respecting the privacy and confidentiality of residents and their family members. I understand that failure to do so may result in termination of the partnership with St Joseph's Home.

I consent St Joseph's Home to record and use my name, image, voice, video and interview for its publicity materials for the purposes of enabling St Joseph's Home to further its mission in the community.

I acknowledge that STJH reserves the right to accept or decline my application to volunteer based on the organisations' needs.

**Applicant's Acknowledgement**

Name (as in NRIC): \_\_\_\_\_

NRIC / FIN No. (last 3 digits & checksum e.g. Sxxxx567/A): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_