



## THE NATIONAL AUTISM SOCIETY OF MALAYSIA VOLUNTEER REGISTRATION

1. Name : \_\_\_\_\_
2. No.ic/passport : \_\_\_\_\_
3. Sex : Male / Female      Marital status : \_\_\_\_\_
4. Race : \_\_\_\_\_
5. Date of birth : \_\_\_\_\_
6. Home address : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Postcode : \_\_\_\_\_
7. Telephone : \_\_\_\_\_
8. E-mail : \_\_\_\_\_
9. Employment status : \_\_\_\_\_  
 Position : \_\_\_\_\_  
 Employer : \_\_\_\_\_
11. Transport available : Car :  Van :  Lorry :  Motorbike :
12. Type of voluntary work preferred :  

Therapy : <input type="checkbox"/>	Counselling : <input type="checkbox"/>	Music : <input type="checkbox"/>	Ground activities : <input type="checkbox"/>
Speech : <input type="checkbox"/>	Administration : <input type="checkbox"/>	Dancing : <input type="checkbox"/>	Sports / Games : <input type="checkbox"/>
Occupational : <input type="checkbox"/>	Teacher Training : <input type="checkbox"/>	Art & Craft : <input type="checkbox"/>	

  

Outings : <input type="checkbox"/>	Classroom teacher assistant : <input type="checkbox"/>	Cooking lessons : <input type="checkbox"/>
Play : <input type="checkbox"/>	Others (s) : <input type="checkbox"/>	Computer lessons : <input type="checkbox"/>
Others (s) : <input type="checkbox"/>	Specify : _____	Specify : _____
13. Availability : As needed :   
 Specify days :  Days : M T W T F S S

SIGNATURE OF APPLICANT : \_\_\_\_\_  
 DATE OF APPLICATION : \_\_\_\_\_

For The National Autism Society Of Malaysia Use Only	
1) Approval Of Volunteer Application : Accept : <input type="checkbox"/>	Reject : <input type="checkbox"/>
2) Person In Charge : _____	Signature : _____
3) Date Entered : _____	Volunteer No : _____