



Introduction

The Volunteer Service of Ruthtonjee & Tang Shiu Kin Hospitals is coordinated by the Jockey Club Health Resource Centre. The aim is to collaborate with the hospital mission of rendering whole-hearted health care to our patients in partnership with the community. Through the volunteer service, it is hoped that our patients can feel the concern and care tendered by the volunteers in the community. At the same time, our volunteers can have a better understanding on hospital services.

Mission

- 1) To boost up a spirit of mutual help through activities.
- 2) To cultivate volunteers with a positive and correct view towards life.
- 3) To improve communication amongst patients, Hospitals and the community.
- 4) To enhance the spirit of "whole-hearted health care" through active participation of volunteers in Hospitals activities.
- 5) To encourage youngsters to show more concern on the community and to develop their potentials.

Enquiry

Address : Block C, 5/F, Ruthtonjee Hospital, 266 Queen's Road East, Wan Chai, Hong Kong

Tel : 2291 2511

Fax : 2291 1047

E-mail : rtskh_hrc@ha.org.hk

Website : <http://www.healthyhkec.org/centres/rhtsk>

Supporting Service (Ambassador)

Gardening

Clerical Supporting

Drug Packaging

SOPD

Laundry Service

Stationing (OSS)

Rehab Shop

Others: _____

6) Time Available:

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Night							

* Please delete as appropriate.

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Confidentiality and Participation Agreement

1) The information provided will only be used for this application and will be processed in accordance with the Personal Data (Privacy) Ordinance.

2) I have read and agreed with all the Terms and Conditions above.

Signature of applicant: _____

Date: _____

Signature of parents / guardian: _____ (For applicant who under age 18)

* The HA guidelines for volunteer services are the references for regulation.

* Please complete and return this form to Health Resource Centre or by fax to 2291 1047.

* We will arrange an interview within 8 weeks and inform the result to the applicant within 2 weeks after the interview.

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For Office Use

Type of applicant: Community

Staff of HA

Relative of Patient (Type of disease: _____)

Patient (Type of disease: _____)

(Physical Condition: Recovered / Follow-up Consultation)

Date of interview: _____

Interviewer: _____

Result: Accepted (Service: _____)

Fail (Reason: _____)

Date of Notice: _____

Date if IC Training: _____

Training Venue: _____