HAIG GIRLS' SCHOOL

51 Koon Seng Road Singapore 427072

Name & Signature of Parent



Telephone: 6344 0293 Facsimile: 6447 4169

Date

PARENT VOLUNTEER RECRUITMENT FORM

Particulars of Child			
Name	: BC No	d	Class:
Particulars of Parents			
Name of Father: NRIC No: Occupation:		า:	
Contact Number: E-mail address:			
Name of Mother: NRIC No: Occupation: _		n:	
Contact Number: E-mail address:			
Please indicate the areas that you would be able to contribute/participate. Please indicate the areas that you would be able to contribute/participate.			
S/N	Areas		with a tick (√)
1	English Reading for Primary 1		
2	Learning Journeys		
3	Arts & Aesthetics		
4	CCAs (Brownies, Red Cross, Cultural Clubs, Drama, Badminton, Swimming etc. Please state the CCA:		etc.
5	Event-based: Total Defence Day, Racial Harmony Day, Sports Day, Children's Day, Chinese New Year, Hari Raya, Deepavali, etc		n's
6	Project-based: Involvement in Integrated Project Work @ HGS, SPACES, CCA Carnival, etc		
7	Community Involvement Work Please specify area of interest:		
8	Workshop / Talk (As a Facilitator) Please identify area of expertise:		
9	Any other areas you would like to contribute or particle (Please Specify)	ipate in	