

The details in this form remain valid for 3 years, unless circumstances change

Recruiter Name: _____ Service: _____ Contact Number: _____

I am interested in volunteering with:

Retail/ Recycling Shop Disaster Recovery Specific Service/Program Other

Details: _____ Location: _____

About You

Title: _____ First Name: _____ Surname: _____

Previous Name/s: _____ Preferred Name: _____

Date of Birth: ____/____/____ Gender: Male Female Prefer not to disclose

Indigenous: Yes No Culturally and Linguistically Diverse (CALD) Yes No Details: _____

Residential Address: _____

Suburb: _____ State: _____ Postcode: _____

Postal Address: _____

Telephone Contact: Landline: _____ Mobile: _____ Email: _____

Preferred Contact method: Post Phone SMS Email

Name of Parish/Church affiliated with (if applicable): _____

Driver Licence: Yes No Class: _____ Expiry Date: ____/____/____

Working with Children Check: Number: _____ Expiry Date: ____/____/____

Working with Vulnerable People: Number: _____ Expiry Date: ____/____/____ Copy Attached: Yes No

First Aid Qualification: Yes No Expiry Date: ____/____/____ Copy Attached: Yes No

Mental Health First Aid: Yes No Expiry Date: ____/____/____ Copy Attached: Yes No

Emergency Contact Details – MUST be provided

Name: _____ Relationship: _____

Best Contact Number: _____

Occupation, Skills and Interests

Current Occupation: _____

Previous Occupation/s: _____

Education/Training: _____

Languages spoken: _____

Other skills and experiences (including previous volunteer or mentor experience) _____

Availability

Please indicate the days/times you are available to volunteer

Flexible

Weekday Daytime Evening

Weekend Daytime Evening

Comments: _____

Volunteering Information

Reason for Volunteering: Work/Study Related Serving the Community Personal Development

Centrelink or other Agency Requirement Other: _____

Are you currently volunteering for Anglicare/Church/Parish in another position? Yes No

Details: _____

Are you currently volunteering for another Emergency Service/Disaster Recovery organisation? Yes No

Details: _____

Are you currently volunteering for any other group/organisation? Yes No

Details: _____

How did you find out about this role? Word of Mouth Anglicare Website Other Website

Social Media School Church Other: _____

Referees

Please supply the name, address and phone number of 2 referees over the age of 18 who are able to give a report of your good character and suitability for a volunteer. **Note:** Immediate family members will not be accepted as referees

Referee 1: Person who has known you longer than 3 years (Please select relationship)	Name: _____ Contact Number: _____ Relationship to applicant: Employer Teacher Clergy/Parish Member Other Details: _____ Address: _____ Email: _____
Referee 2: Person who has known you longer than 3 years (Please select relationship)	Name: _____ Contact Number: _____ Relationship to applicant: Employer Teacher Clergy/Parish Member Other Details: _____ Address: _____ Email: _____

Privacy Statement

Any personal information you provide is protected under the Privacy Act 1988 and is collected for the purpose of assessing your application to volunteer with us. It can only be disclosed to someone else if you have been given reasonable notice of the disclosure; where disclosure is authorised or required by law or is reasonably necessary for the enforcement of the criminal law; if it will prevent or lessen a serious and imminent threat to a person's life or health; or if you have consented to the disclosure.

However, if you choose not to provide the information requested, we may not be able to process your application or properly consider you for a volunteer position.

If you have questions or concerns about how your personal information is handled you can contact the Privacy Officer at Anglicare by emailing privacy@anglicare.com.au

I consent to my personal information being used or disclosed in the manner described above Yes No

For Disaster Recovery volunteers, I consent that my details as disclosed on this form may be released to Anglicare Sydney for the purposes of Disaster Recovery administration and activation Yes No

Anglicare Disaster Recovery Volunteers will receive periodic newsletters.

Please tick the box if you **DO NOT** wish to receive the following:
 Anglicare Newsletters Information on Anglicare Events and Fundraising

This application must be completed by all applicants applying for Volunteer positions in programs or services across Anglicare. Once all pages have been completed, please return this for to your recruiting officer or to Anglicare via:

Mail: Anglicare Volunteers Manager, GPO Box 360, Canberra ACT 2601

Email: volunteers@anglicare.com.au

Fax: 02 6245 7191

Please tick either **YES** or **NO** for each question. Where a **YES** answer is given it will not automatically rule an applicant out of selection. However, in these situations the Application will be forwarded to Human Resources for assessment before an appointment can be made. Wherever a **YES** answer is given, please provide relevant information regarding your response on a separate paper and indicate the current status of the issue. We may also contact you to discuss the issue.

	Yes	No
Fitness for Duty: Do you have any physical and/or mental condition(s) that may affect the tasks that you can perform and your ability to work safely?		
Criminal Matters: Have you ever been charged with or convicted of a criminal offence?		
Violence: Have you ever been subject to an apprehended violence order?		
Traffic Matters: Have you ever had your driver's license suspended or cancelled?		
Misconduct or Reportable Conduct: Have you ever committed serious misconduct or had a complaint or allegation against you reported to a government agency such as the Police, Ombudsman's Office or Department of Health and Ageing?		
Substances: Have you a history of alcohol abuse or a history of substance abuse including recreational or illegal drugs and misuse of prescription, over-the-counter medications?		
Harassment: Have you done anything in the past or present that may result in allegations being made against you of bullying or any form of harassment of adults?		
Suspension of Permission: Have you ever had permission to undertake paid or voluntary work with children, young people or vulnerable adults refused, suspended or withdrawn in Australia or any other country?		
<p>Sexual Misconduct: Have you ever engaged in any of the following conduct, even though never having been charged?</p> <ul style="list-style-type: none"> • sexual contact with someone under your care other than your spouse (such as a parishioner, client, patient, student, employee or subordinate) • sexual contact with a person under the age of consent • illegal use, production, sale or distribution of pornographic materials • conduct likely to cause harm to a child, young person or vulnerable adult, or to put them at risk of harm 		
Removal of Child: Has a child or dependent young person or vulnerable adult in your care (as a parent or in any other capacity) ever been removed from your care, or been the subject of a risk assessment by the authorities?		
<p>Child Abuse: Have you done anything in the past or present that may result in allegations being made against you of child abuse?</p> <p>Child abuse means; bullying; emotional abuse; harassment; neglect; physical abuse; or sexual abuse.</p>		
Disclosure: Is there anything in your background that you have not disclosed in the application, which if it becomes public knowledge could adversely affect the assessment of your good name and character?		

	Yes	No
Ethical Behaviours: Are you aware that Anglicare expects high standards of ethical behaviour from all staff and volunteers?		

Declaration

The information I have provided is true and complete, and understand that my engagement may be terminated should it be subsequently found that this information is false, misleading or intentionally omitted.

- 1) I declare that I am not
 - a. a prohibited person (i); or
 - b. a person who, if they were a resident in NSW, would be a prohibited person; or
 - c. a person in respect of whom information has been entered on the National Register(ii); or
 - d. a person who has been convicted of an offence punishable by more than 10 years imprisonment; or
 - e. a person who has been convicted or found guilty of a sexual offence
- 2) I understand that checks may be made to verify the above and hereby give permission for any background checks that may be necessary.
- 3) If there are any changes in regard to the above I will notify the program/service manager or the Volunteers Manager.
- 4) I make this declaration conscientiously believing it to be true and in accordance with the provisions of the *Statutory Declarations Act 1959*.
- 5) I have received a copy of the Code of Conduct and the Volunteer Policy and I agree to adhere to the Organisation's Policies and Procedures, work in a safe manner and maintain confidentiality within my role.

Signature: _____ **Date:** ____ / ____ / _____

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- I. A prohibited person is someone who is a registrable person as defined in the *Child Protection (Offenders Registration) Act 2000 (NSW)* or has been convicted of one of the following offences:
 - murder of a child;
 - serious sex offence, including carnal knowledge;
 - child-related personal violence offence (an offence committed by an adult involving intentionally wounding or causing grievous bodily harm to a child);
 - indecency offences punishable by imprisonment of 12 months or more;
 - kidnapping (unless the offender is or has been the child's parent or carer);
 - offences connected with child prostitution;
 - possession, distribution or publication of child pornography; or
 - attempt, conspiracy or incitement to commit the above offences
 - II. The National Register is a register established by a canon of the National Anglican Church containing details of complaints of sexual misconduct or child abuse made against clergy and lay people which have been made to, or dealt with by, a church body.