



# Volunteer Application Form – Confidential

Name of site or service: \_\_\_\_\_

## Your personal details

|   |  |                                   |  |
|---|--|-----------------------------------|--|
| Given name:   |  | Preferred name for name badge:    |  |
| Family name:  |  |                                   |  |
| Home address:   |  | Date of birth:                    |  |
|   |  | Female / male / gender of choice: |  |
| Postal address:<br><i>Same as above</i> <input type="checkbox"/>  |  | Home phone:                       |  |
|   |  | Mobile:                           |  |
| Email address:  |  |                                   |  |
| Emergency contact name:   |  | Emergency contact phone:          |  |
| Do you have any medical conditions that we should be aware of in case of an emergency?<br>For example: diabetes, severe food allergy, asthma, epilepsy <input type="checkbox"/> No <input type="checkbox"/> Yes<br><i>(If yes please give details below and discuss at your interview.)</i> |  |                                   |  |
| Do you need any special assistance because of a disability?<br><i>(If yes please give details below and discuss at your interview.)</i> <input type="checkbox"/> No <input type="checkbox"/> Yes  |  |                                   |  |

## How can you connect with our community?

|   |   |
|---|---|
| Connection to School                          | <input type="checkbox"/> Parent/ Guardian <input type="checkbox"/> Family Relative<br><input type="checkbox"/> Grandparent <input type="checkbox"/> Other _____   |
| Volunteer Areas of Interest                   | <input type="checkbox"/> Classroom Assistance <input type="checkbox"/> Canteen<br><input type="checkbox"/> Governing Council <input type="checkbox"/> School Committees<br><input type="checkbox"/> Other _____ |
| Your country of birth:                        |   |
| Are you Aboriginal or Torres Strait Islander? | <input type="checkbox"/> No <input type="checkbox"/> Yes  |
| Languages you speak other than English:       |   |



|   |  |
|---|--|
| <b>Availability:</b><br>What days and times are you available to volunteer?   |  |
| <b>Experiences, interest and skills:</b><br>List any experiences/interests you can contribute to your role as a volunteer.<br>For example, mentoring, gardening, administration, sport and so on. |  |

## Your employment or study details

|  |  |               |  |
|--|--|---------------|--|
| <b>Current (or most recent) employment or study details (if any) or community involvement:</b> |  |               |  |
| Name of organisation:  |  |               |  |
| Your role:   |  | Phone number: |  |

## Screening

|  |  |
|--|--|
| Volunteering with us might mean that you need a relevant history screening.  |  |
| You understand that if a screening is needed you will not be able to start volunteering until a clearance has been received. | Yes <input type="checkbox"/> No <input type="checkbox"/> |

## Your referees

We might contact these people for more information about you. We might not need to – it depends on the type of volunteering you'll be doing. We need the contact details for 2 different people.

### Referee 1

|  |  |
|--|--|
| Name:  | Email, phone or mobile:                        |
| How do you know this person?                     |  |
| <input type="checkbox"/> friend                  | <input type="checkbox"/> relative              |
| <input type="checkbox"/> employer                | <input type="checkbox"/> volunteer coordinator |
| <input type="checkbox"/> other (please specify): |  |

### Referee 2

|  |  |
|--|--|
| Name:  | Email, phone or mobile:                        |
| How do you know this person?                     |  |
| <input type="checkbox"/> friend                  | <input type="checkbox"/> relative              |
| <input type="checkbox"/> employer                | <input type="checkbox"/> volunteer coordinator |
| <input type="checkbox"/> other (please specify): |  |



# Volunteer Declaration – Confidential

To make sure we meet our commitment to child safety, we need this information and declaration from you. The information you provide will be treated sensitively and confidentiality. If you have any questions about this declaration, you can talk to a site leader about it.

|   |                             |                              |
|---|-----------------------------|------------------------------|
| Have you ever been investigated, arrested, reported for or pleaded or found guilty of any criminal offence including any traffic offences (not including parking infringements)?          | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| Have you ever been dismissed or resigned from any employment or a volunteer role in response to or following allegations of improper conduct relating to children?                        | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| Have you ever been the subject of allegations or an investigation or any other process relating to alleged unsatisfactory performance or misconduct by you as a volunteer or an employee? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| Have you ever been the subject of allegations of inappropriate conduct of a sexual nature towards or in relation to anyone?   | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| Have you ever been refused a child related employment screening or working with children check in South Australia or in another Australian jurisdiction?                                  | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

Note: If you answered ‘yes’ to any of the above questions, you might be asked for more details, including any relevant documentation, before you can be placed as a volunteer.

I confirm and declare that to the best of my knowledge I have truthfully answered all questions.

I understand that if I provide any false or misleading information I cannot start or stay on as a volunteer.

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_ (day/month/year)

Please give this completed form and declaration to the centre, preschool or school you want to volunteer at. They might contact you and organise a time for an interview or a chat.

The information you provide will be treated sensitively and confidentiality according to the [State Records Act 1997](#) and the [Information Privacy Principles Instruction](#).

## OFFICE USE ONLY

Site leader: \_\_\_\_\_ Proof of ID sighted  File created and stored securely and confidentially