

C3 CHURCH QUEANBEYAN: VOLUNTEER APPLICATION FORM

SP3 Resource Code CSE3-OA

<p>CONFIDENTIAL</p>	<p>This form must be completed by all applicants for voluntary work with ...C3 Queanbeyan...</p> <p>The information requested will:</p> <ul style="list-style-type: none"> provide an insight into the applicant's experience, gifts, abilities and resources. highlight an applicant's responsibilities as a leader. remain confidential. <p>On completion, please forward this form to</p> <p>.....</p> <p>I am applying to be a volunteer for:</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>My Team Leader</p> <p>.....</p>		
<p>PERSONAL DETAILS</p> <p>Name in full (<i>Please print</i>):</p> <p>Mr / Mrs / Ms / Miss M / F</p> <p>Preferred Name: DOB / /</p> <p>Email: (PLEASE PRINT CLEARLY).....</p> <p>EMERGENCY CONTACT DETAILS</p> <p>Name:.....</p> <p>Relationship:</p> <p>Address:</p> <p>..... Postcode:</p> <p>Phone (H): (W):</p> <p>(M):</p>			
<p>REFEREES: <i>Before your application can be approved, please give details of two people who have agreed to be your referees. Neither should be a family member</i></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <p>Contact details:</p> <p>Name:</p> <p>Email:</p> <p>(M):</p> </td> <td style="width: 50%; border: none;"> <p>Contact details:</p> <p>Name:</p> <p>Email:</p> <p>(M):</p> </td> </tr> </table>	<p>Contact details:</p> <p>Name:</p> <p>Email:</p> <p>(M):</p>	<p>Contact details:</p> <p>Name:</p> <p>Email:</p> <p>(M):</p>	
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PLEASE TELL US ABOUT YOURSELF

1. Please outline your reasons for offering to work with children/young/vulnerable people.
2. What experience do you have of working with children or other vulnerable people?
3. Please list any relevant qualifications and/or training that you have attained or attended (including first aid).
4. Is there any medical condition, relevant information or limitation (e.g. epilepsy) that may affect your ability to fully participate as a volunteer? (Please give details)

CHILD PROTECTION STATEMENT

Children and young or vulnerable people who are involved in our programs should receive the highest possible standard of care and protection. Therefore, in all our work, we seek to ensure the well-being and development of each child, young or vulnerable person. Within this context, is committed to the protection of children and vulnerable persons from all forms of abuse.

1. Have you been interviewed, questioned or charged by Police in relation to any offence involving children, young people, violence, alcohol or drugs? Yes No

2. Have you been convicted of any offence involving children, young people, violence, alcohol or drugs? Yes No
If 'yes' for either question, please give details or you may choose to discuss this with the person named on the front of this form.

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All applicants are required to undergo a Working with Children (or Police Records) Check.

I confirm that the information contained in this application is true and correct.
I have read the *ChildSafe SP3 Team Member's Guide* and agree to abide by its guidelines.
If applicant is under 18, parent or guardian must also sign.

Name:..... Name:.....

Signed:..... Signed:.....

Date:...../...../..... Date:...../...../.....