



Volunteer Application Form

Title: _____ First Name: _____ Last Name: _____

Date of Application: ____ / ____ / ____ Street Address: _____

Suburb: _____ Postcode: _____

Phone: _____ Email _____ Gender: _____

Date of Birth: ____ / ____ / ____ Driver's Licence Number: _____

Country of Birth: _____

Please list any health concerns or pre-existing injuries that are relevant to your volunteering role:

Copy of digital certificate for COVID vaccination required (or medical exclusion certificate): Yes/No

Emergency Contact Information: Name: _____

Phone: _____ Relationship: _____

Occupation / Study: *Current* _____

Previous _____

Other Languages: _____

What skills do you have? _____

How did you hear about us? _____

Have you done volunteer work before? Yes / No

Any other information you consider relevant to your application? _____

Why would you like to volunteer at St Mary's House of Welcome?

We offer a range of volunteering opportunities. Are you interested in nominating yourself for episodic Events + Programme Support?

Please nominate days and times you are available to volunteer:

Day	Kitchen - 08:00 - 10:00	Kitchen - 10:30 - 14:00	Reception - 08:30 - 13:00
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

VOLUNTEER BACKGROUND CHECK

To best assess where your skills could be utilised, we require references from 2 people who know you either personally or in a work environment.

REFEREE CHECK

Please supply - (1) One referee from your work or professional background.
(2) One person who can give a character reference for you.

Name: (1) _____ (2) _____
Position _____
Phone: _____

POLICE CHECK and WORKING WITH CHILDREN CHECK

At St Mary's House of Welcome, a Police background check and Working With Children check is required. Please be assured that all information will remain confidential, and will be destroyed when no longer needed. These checks are done at our expense and we are happy to provide a copy to you upon request.

(Please Note: A previous offence does not necessarily disqualify you from volunteer service. However, failing to disclose such information may lead us to decline your volunteer offer.)

Are you willing to sign a consent form for these checks? Yes / No

CONFIDENTIALITY AGREEMENT

I, _____ agree that I will maintain at all times the confidentiality of all privileged or proprietary information to which I am exposed while serving as a volunteer with St Mary's House of Welcome, whether this information involves a service user, a paid staff member, any other person or involves overall agency business.

Signed: _____ Date: ____/____/____

VOLUNTEER AGREEMENT

I understand that the work I do is voluntary and must be in accordance with the St Mary's House of Welcome policies, volunteer guidelines and all relevant legislation - including Code of Conduct, Child Safe Policy, EEO, OH&S, Internet Usage, sexual harassment, violence & bullying, drug & alcohol misuse and Privacy. In signing this agreement, I will abide by the standards of behaviour set out in the Volunteer Handbook

Signed: _____ Date: ____/____/____

165-169 Brunswick Street, FITZROY VIC 3065

Tel: 03 9417 6497

Mob: 0417 326 200 Email: volunteers@smhow.org.au