

# **Volunteer Application Form**

Title: F	First Name:	st Name: Last Name:					
Date of Applic	ation: / /	Street Add	ress:				
Suburb:		Postcode:					
Phone: Gender:							
Date of Birth:	//	_ Drive	er's Licence N	lumber:			
Country of Bir	th:						
Please list any	health concerns or p	pre-existing inju	iries:				
Copy of digital	certificate for COVI	D vaccination re	equired (or m	edical excl	usion ce	ertificate): Yes/No	
Emergency Co	ntact Information:	Name:					
		Phone:		Relatio	onship: _		
Occupation / S	Study: Current						
	Previous						
Other Languag	ges:			······			
What skills do	you have?						
How did you h	ear about us?						
Have you don	e volunteer work bei	fore? Yes /	No				
Any other information you consider relevant to your application?							
Why would yo	u like to volunteer a	t St Mary's Hou	se of Welcon	ne?			
·	rvice:		volunteer:				
Day	Times	Weekly	Fortnightly	Monthly	Other -	- Please be specific	
Mondav Tuesdav							
Wednesday							

<u>Thursdav</u> 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**

#### 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://						
1	165-169 Brunswick Street, FITZROY VIC 3065						

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