|  |  |
| --- | --- |
| Title | Volunteer Role Application Form |
| Document code | 6.1.17d | Version # | 11 |



***Please complete and return to:***

|  |  |
| --- | --- |
|  | **Date of application**: \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_**Date of interview**: \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ |
| **Program Name**(if known) |  |

## **Personal Details**

|  |  |  |
| --- | --- | --- |
| **Surname:**  | **Given Names:** | **Preferred Name:** |
| **Residential Address:**  | **Postcode:**  |
| **Postal Address:**  | **Postcode:**  |
| **Phone:** | **Home:**  | **Work:**  | **Mobile:**  |
| **Email:**  |
| **Can you be contacted at work?** [ ]  Yes [ ]  No |
| **Date of Birth:**  \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ | **Country of Birth:**  |
|  [ ]  **Female** |  [ ]  **Male** |  [ ]  **Other** |
| **Cultural Identity:** | **Do you wish to identify as Aboriginal and/or Torres Strait Islander?**[ ]  Yes [ ]  No |
| **Have you lived overseas for more than 12 months at any one time in the last 10 years?**[ ]  Yes [ ]  No*If yes, you will need to consent to an international police check which will be done by Jesuit Social Services.* |

***Emergency Contact***

|  |  |  |
| --- | --- | --- |
| **Name:** | **Phone:** | **Relationship:**  |

***Police and Referee Checks***

*Acceptance as a volunteer is subject to a satisfactory interview; police, Working With Children and referee checks. Forms and assistance will be provided at interview.*

## **Please provide details of two professional/work/study/community based referees**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Name** | **Organisation** | Position/Relationship | **Phone** |
| 1 |  |  |  | Work:Mobile: |
| 2 |  |  |  | Work:Mobile: |

|  |
| --- |
| **Languages spoken:** |
| First Language: |  |
| Other languages: |  |
| **Other voluntary work:** *(please include past and present volunteering experience if any)* |
| **Hobbies /Interests /Skills:** |
| **Are there any issues which you would like to disclose that are relevant and require consideration or support by Jesuit Social Services when matching you with a volunteer role?** |

*To assist with a compatible assignment, please give brief details of the following****:***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Education** | ☐ | Secondary | ☐ | Tertiary |
| **If you are a student: What course are you enrolled in?**  |
| **Employment Status:** | Full time | Part time | Seeking work | Not seeking work | Retired | Student |
|  |[ ] [ ] [ ] [ ] [ ] [ ]
| **Current Occupation:** |
| **Work History:**

|  |  |  |
| --- | --- | --- |
| Company Name | Position | Yrs of service |
|  |  |  |
|  |  |  |
|  |  |  |

 |

Please indicate your availability for volunteering

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | ***Wednesday*** | ***Thursday*** | ***Friday*** | ***Saturday*** | ***Sunday*** |
| ***Morning*** |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| ***Afternoon*** |[ ] [ ] [ ] [ ] [ ] [ ] [ ]
| ***Evening*** |[ ] [ ] [ ] [ ] [ ] [ ] [ ]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Indicate your transport options:**  | [ ] car  | [ ] train  | [ ] tram  | [ ] bus  | [ ] bike  | [ ]  walk |
| Preference for suburbs for volunteering: |  |  |  |
| *To help us with our recruitment strategies, please indicate how you heard about our program:* |
|  | [ ]  Local newspaper | [ ]  | Local poster or flyer | [ ]  | Another volunteer/mentor | [ ]  | Internet |
|  | [ ]  Personal referral |[ ]  Volunteer Resource Centre |[ ]  Through the workplace  |[ ]  Other |

**Privacy Statement:**

*Personal information collected as a result of your application will be used by Jesuit Social Services for general administration, as well as organisational planning and reporting, research, evaluation, auditing, and marketing. Only authorised personnel have access to this information. Your personal information may be disclosed to Commonwealth and State Government authorities and agencies and other entities relevant to the purposes of this application.*

*By submitting this application you hereby consent to the information provided by you being used for the purpose relating to this application. Your information will be used in accordance with legislative requirements and this consent.*

|  |  |
| --- | --- |
| **Full name:** |  |
| **Signature:** |  |
| **Interviewed by:** |  | **Date:** | \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ |

|  |  |
| --- | --- |
| **Office Use:** | Police Check No:  |
| WWCC No: Expiry Date: |
| Licence Number: Expiry Date: |
| OTHER |

*Some Jesuit Social Services’ Mentoring Programs may require additional information to be collected from you by program staff prior to commencement.*

END OF DOCUMENT