

Volunteer Application Form

1. CONTACT DETAILS

First Name _____ Surname _____

Address _____

Email _____

Mobile _____ Home Phone _____

Drivers Licence Number _____ Expiry _____

Do you hold Australian Citizenship or Australian Residency: ☐ Yes ☐ No

1. CONTACT PERSON IN CASE OF EMERGENCY

Name _____

Relationship _____

Mobile _____ Home Phone _____

2. WORKING WITH CHILDREN CHECK Yes [] No []

All applicants will be required to provide a valid Working with Children Check (volunteer version - FREE) reference number and date of birth for verification. If you do not have a current WWCC we will send you the link during your induction process.

WWCC Number _____ Expiry _____

Date of Birth _____

3. MEDICAL CONDITIONS

Do you have any existing medical condition/ disability/injury/allergy that may impact your ability to volunteer with us or the type of activity you may perform? Yes [] No []

If yes, please provide details:

(Please Note: Any information given in response to this question will be strictly confidential and viewed only by the Volunteer Coordinator and Supervisor to ensure your health and wellbeing)

4. AMBULANCE COVER Yes [] No []

In the case of an emergency an ambulance will be contacted and associated expenses the responsibility of individual staff / volunteers. Everyone is encouraged to have an ambulance subscription.

Please Note: Your contact details will not be passed to any third parties unless we have your permission and will only be used for communicating information relevant to your volunteer position.

5. COMMITMENT

If you are successful with your application to volunteer at Housing Plus, please let us know when you would be available for volunteer work.

* If you are joining a committee there is no need to complete this section as meeting dates and times will be decided at the committee meetings.

| | MON | TUE | WED | THU | FRI | SAT | SUN |
|----|-----|-----|-----|-----|-----|-----|-----|
| AM | | | | | | | |
| PM | | | | | | | |

Any comments about availability or preferred times _____

6. What time frames would suit your volunteering activities? Check as many as you like.

☐ SHORT-TERM

☐ LONG-TERM/ONGOING

☐ EVENTS - If you select this option, we will put your name on our events email database and contact you when events are scheduled to happen. You can then decide whether or not you would.

7. DO YOU HAVE YOUR OWN TRANSPORT GETTING TO AND FROM A VOLUNTEERING POST?

☐ Yes

☐ No

8. WHAT IS YOUR INTEREST IN WANTING TO VOLUNTEER WITH HOUSING PLUS?

9. WHAT ARE THE OUTCOMES YOU ARE HOPING FOR? (e.g., social connection, gain employment, career change, learn new skills/experience, give back to my community)

10. AREA OF INTEREST, RELEVANT QUALIFICATIONS AND SKILLS

These options could include areas you are skilled in OR areas you are interested in.

- | | |
|---|---|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Health & wellbeing |
| <input type="checkbox"/> Childcare/children | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Counselling and Social Support | <input type="checkbox"/> Tutoring and Mentoring |
| <input type="checkbox"/> Events | <input type="checkbox"/> Writing and communication |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> I am not sure and happy to discuss further |
| <input type="checkbox"/> Garden Maintenance/outdoor | <input type="checkbox"/> Other: _____ |

Please detail any formal qualifications and experience you have that you would like to incorporate in your volunteering role:

11. ARE THERE ANY SKILLS YOU ARE INTERESTED IN LEARNING? (e.g., data entry, fundraising, events)

12. REFERENCES

Please supply contact details of two character or work references. References will be contacted after an applicant has progressed to the interview stage.

Reference 1

Name _____
Relationship _____ Mobile _____

Reference 2

Name _____
Relationship _____ Mobile _____

13. POLICE HISTORY CHECK

Housing Plus will conduct a Volunteer National Police Check using a third party for all volunteer applicants as part of our screening process.

Any fees associated with these checks will be reimbursed by Housing Plus if necessary.

14. INSURANCE

All Housing Plus Volunteers are covered by an AON Insurance Policy should you be injured while performing duties associated with your volunteer service.

15. SHARING YOUR INFORMATION

If Housing Plus does not have a volunteer opportunity that matches your interests do you give us permission to share your application form with a third party – this will be discussed with you before we take any further steps.

☐ Yes ☐ No

16. DECLARATION

The information provided on this application is true to the best of my knowledge.

Name _____

Signed _____ Date _____