Volunteer Application Form

1. CONTACT DETAILS

First Name	Surname			
Address				
Email				
Mobile	Home Phone			
Drivers Licence Number	Licence Expiry			
Do you hold Australian Citizenship or Australian	n Residency: □ Yes □ No			
1. CONTACT PERSON IN CASE OF EMERGE	ENCY			
Name				
Mobile Home Phone				
2. CURRENT WORKING WITH CHILDREN CH	CHECK Yes[] No[]			
All applicants will be required to provide a valid	d Working with Children Check (volunteer version -			
FREE) reference number and date of birth for ve	verification. If you do not have a current WWCC we wil			
send you the link during your induction process	S.			
WWCC Number	Expiry			
Date of Birth				
3. MEDICAL CONDITIONS				
Do you have any existing medical condition/ dis	sability/injury/allergy that may impact your ability to			
volunteer with us or the type of activity you may	ay perform? Yes[] No[]			
If yes, please provide details:				
(Please Note: Any information given in response	se to this question will be strictly confidential and			
viewed only by the Volunteer Coordinator and S	Supervisor to ensure your health and wellbeing)			

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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. 5. COMMITMENT If you are successful with your application to volunteer at Housing Plus, please let us know vould be available for volunteer work. * If you a joining a committee there is no need to complete this section as meeting dates and will be decided at the committee meetings. MON TUE WED THU FRI SAT SUN SAM SAM	4.	AMBULANC	E COVER Y	'es[]	No []				
Subscription. 5. COMMITMENT If you are successful with your application to volunteer at Housing Plus, please let us know would be available for volunteer work. * If you a joining a committee there is no need to complete this section as meeting dates and will be decided at the committee meetings. MON								•	
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MON TUE WED THU FRI SAT SUN AM PM Any comments about availability or preferred times	* If you	u a joining a d	committee t	here is no ne	eed to com	olete this s	section as n	neeting date	s and times
Any comments about availability or preferred times	will be	decided at t	he committe	ee meetings	S.				
Any comments about availability or preferred times		MON	TUE	WED	THU	FRI	SAT	SUN	
Any comments about availability or preferred times	AM								
6. What time frames would suit your volunteering activities? Check as many as you lil SHORT-TERM LONG-TERM/ONGOING EVENTS - If you select this option, we will put your name on our events email datal contact you when events are scheduled to happen. You can then decide whether you like to assist with each event as they are announced. 7. DO YOU HAVE YOUR OWN TRANSPORT GETTING TO AND FROM A VOLUNTEERING PORTS.	PM								1
7. DO YOU HAVE YOUR OWN TRANSPORT GETTING TO AND FROM A VOLUNTEERING PO		What time f SHORT-1 LONG-TE EVENTS contact you	Frames would FERM FERM/ONGOIN - If you sele	Id suit your v	volunteerir n, we will p uled to hap	n g activitie ut your nar pen. You c	es? Check a	as many as y	database and
	7.	DO YOU HAY	VE YOUR OW		•		FROM A V	OLUNTEERIN	IG POST?

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8.	WHAT IS YOUR INTEREST IN WANT	TING TO V	OLUNTEER WITH HOUSING PLUS?
9.	WHAT ARE THE OUTCOMES YOU AI career change, learn new skills/exp		I G FOR? (e.g., social connection, gain employment, give back to my community)
10	. AREA OF INTEREST, RELEVANT QU	JALIFICA	TIONS AND SKILLS
These	e options could include areas you are	skilled in	OR areas you are interested in.
	Administration		Health & wellbeing
	Childcare/children		Transportation
	Counselling and Social Support		Tutoring and Mentoring
	Events		Writing and communication
	Fundraising		I am not sure and happy to discuss further
	Garden Maintenance/outdoor		Other:
	e detail any formal qualifications and volunteering role:	experier	nce you have that you would like to incorporate in
11.	ARE THERE ANY SKILLS YOU ARE I	INTERES	TED IN LEARNING? (e.g., data entry, fundraising,

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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
applicants as p	ill conduct a Volunteer National Police Check using a third party for all volunteer art of our screening process. iated with these checks will be reimbursed by Housing Plus if necessary. NCE
performing dut	s Volunteers are covered by an AON Insurance Policy should you be injured while ies associated with your volunteer service. G YOUR INFORMATION
permission to s	□No
	n provided on this application is true to the best of my knowledge.
Signed	Date