



ST CARTHAGE'S COMMUNITY CARE

VOLUNTEER APPLICATION FORM

1. Personal Details

Ms Mrs Mr Surname: _____ Given Names _____

Address: _____ Postcode: _____

Telephone: _____ Work: _____ Mobile: _____
Home: _____

Email address: _____

Gender: Male Female Date of Birth: _____

Do you speak a language other than English? No Yes (Please list) _____

Do you have your own car? No Yes Driver's Licence No: _____ Licence Class: _____ Expiry Date: _____

Are you prepared to use your own car for volunteering? No Yes Is your car comprehensively insured? No Yes
If yes, please provide expiry date: _____

2. Emergency Contact

Name: _____ Relationship to Volunteer: _____

Telephone: _____ Work: _____ Mobile: _____
Home: _____

3. Availability Details Please circle the day(s) and times you would be available to volunteer:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
am	am	am	am	am	am	am
pm	pm	pm	pm	pm	pm	pm

Other: please provide details: _____

4. Areas of Interest (Please number in order of priority)

Please detail any interest, activities or special skills which may support your application.

Senior's Day Club Italian Senior's Day Club Office

Transport – Bus Driver Gardener – Respite Cottage Coffee Club

Respite Program for Adults with Intellectual Disabilities

5. Additional Information

Have you any skills or experience in other areas that may be relevant to your work as a volunteer?

No Yes (please describe) _____

Do you have a disability or a medical condition which would affect your ability to do certain types of work

No Yes (please describe and indicate the types of work you cannot perform) _____

Do you have a current First Aid Certificate?

No Yes



ST CARTHAGE'S COMMUNITY CARE

6. Referees

Please provide the name, addresses (preferably email addresses) and phone numbers of two referees:

Name:

Address:

Postcode:

Telephone:

Work:

Mobile:

Home:

Email address:

Name:

Address:

Postcode:

Telephone:

Work:

Mobile:

Home:

Email address

- I certify that to the best of my knowledge, the above information is correct.
- I will complete a Consent to Criminal Record Check
- I understand that a confidential file will be created which will contain information in relation to my role as a volunteer at St Carthage's Community Care and that my details will be entered into a confidential data base. None of the information collected about me will be passed to anyone in the organisation who is not nominated as an authorised person or to anyone outside of the organisation without my written consent.

Name:

Signed:

Date:

Please return your completed application form using one of the methods outlined below

Hand Deliver your Application to: 3 Jubilee Avenue GOONELLABAH NSW 2480

8am - 4.30pm Monday to Friday

Post your Application to: PO Box 4028 GOONELLABAH NSW 2480

Fax Your Application to: 02 6620 0066

Email Your Application to: respites@stcarthages.org.au

*Thank You
For Your Application!*

OFFICE USE ONLY

Received By (Print Name):

Date:

Signature:

Position:



ST CARTHAGE'S COMMUNITY CARE

Model Code of Practice for Organisation Involving Volunteers

In order to enhance the volunteer's experience and comply with legislation and duty of care St Carthage's Community Care will:

- Interview and employ volunteer staff in accordance with anti discrimination and equal opportunity legislation
- Provide volunteer staff with orientation and training
- Provide volunteer staff with a health and safe workplace
- Provide appropriate and adequate insurance coverage for volunteer staff
- Not place volunteer staff in roles that were previously held by paid staff or have been identified as paid jobs
- Differentiate between paid and unpaid roles
- Define volunteer roles and develop clear job descriptions
- Provide appropriate levels of support and management for volunteer staff
- Provide volunteers with a copy of policies pertaining to volunteer staff
- Ensure volunteers are not required to take up additional work during industrial dispute or paid staff shortage
- Provide all staff with information on grievance and disciplinary policies and procedures
- Acknowledge the rights of volunteer staff
- Ensure that the work of volunteer staff complements but does not undermine the work of paid staff
- Offer volunteer staff the opportunity for professional development
- Reimburse volunteer staff for out of pocket expenses incurred on behalf of the organization
- Treat volunteer staff as valuable team members, and advise them of the opportunities to participate in agency decisions and
- Acknowledge the contributions of volunteer staff