
CCC VOLUNTEER APPLICATION FORM

Date:

Name:.....

Address:.....

Male Female Intersex:

Phone: (Home)(Mobile).....

Email:.....

Age: (please circle or highlight)

Under 10	10-19	20-29	30-44	45-54	55-64	65-79	80+
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Are you an Australian citizen? Yes No

If no, what type of visa do you have?.....

Languages spoken at home.....

Previous Training or Qualifications.....

.....

Skills:.....

Interests:.....

Cultural Interests:.....

What type of volunteer work are you looking for? *(Please check/tick boxes below)*

- Admin Childcare EAL Literacy Computers
 Netball Soul Café Customer Service Community Lunch
 Holiday Activities Playgroup Events
 Others (please specify)

Do you have any other skills or information you would like to add?

.....

.....

Availability

When are you available to start your volunteer work?

What days/times are you available to volunteer each week (please tick):

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					

What is the maximum/minimum number of days/hours you would like to volunteer each week?

Maximum: Days..... Hours..... Minimum: Days..... Hours.....

In order to volunteer at CCC you will need to provide copies of the following with this application:

- A national police check received within the past 6 months
- A current Working with Children Check (WWC)
- Fully vaccinated against Covid 19 - needs to be sighted
- An up-to-date resume

Person to contact in case of emergency:

Name:.....

Address:.....

.....

Phone: (H)(BH).....

Relationship to you:

Are you currently taking medication of which we should be aware of? If so, please give relevant information.

.....

Do you have any medical conditions which could restrict you? If so, please give more information.

.....

Do you have a disability or impairment that needs modifications for you to carry out your volunteer duties?

.....

Referees

Referee Name:.....

Phone: (H).....(Mobile).....

Referee Name:.....

Phone: (H).....(Mobile).....

How did you hear about us?

Local paper Social Media Brochure Friend

Other:

Photographic Permission

Please note that photographic images of volunteers and participants in activities at the Centre may be taken by authorised representatives of Cheltenham Community Centre, (CCC) and may be used in any of its advertising, promotional or other material including social media, website, brochures or AGM Annual Report.

If you do not wish to allow such usage, please check box

Would you like to receive CCC Newsletters via email? Yes No

If I am successful in a volunteer position at Cheltenham Community Centre, I agree to abide by any current Victorian Government COVID-19 restrictions and mandates.

Yes No

Volunteer Signature:.....

* * * * *

Office Use Only

Volunteer Summary

Date of Interview:..... Interviewed by.....

Information on Volunteer checked? YES / NO

Interview
comments:.....

.....

.....

.....

.....

Volunteer role preferences:

1.

2.

3.

Volunteer Initial Placement:

1. Date:

2. Date:

3. Date:

Training Courses:

1.....

2.....

3.....