

VOLUNTEER APPLICATION

SURNAME: _____ MAIDEN NAME: (if applicable): _____

FIRST NAME: _____ D.O.B: ___ / ___ / ___

ADDRESS: _____

HOME PHONE No: _____ WORK PHONE No: _____

MOBILE No: _____ EMAIL: _____

PLACE OF EMPLOYMENT / SCHOOLING: _____

VEHICLE REGISTRATION No: _____

LICENCE No: _____ CLASS: _____

TYPE OF VEHICLE INSURANCE: _____

COVER FROM: ___ / ___ / ___ TO: ___ / ___ / ___

EXPERIENCE: _____

HOBBIES/INTERESTS: _____

NATIONAL POLICE CHECKING SERVICE (NPCS):

I hereby authorise Macarthur Temporary Family Care Inc to request an enquiry of the Police Department Records to assist in establishing my suitability in becoming a volunteer with the Agency. Additional consent forms will need to be completed to conduct NPCS.

Signature of Applicant: _____

Signature of Witness: _____

Date: ___ / ___ / ___

OFFICE USE ONLY:

Orientation Completed: Yes No Date: ___ / ___ / ___

Co-ordinator Signature: _____

Working With Children Check Required: Yes No Date: ___ / ___ / ___

Status: Clear Declined

Co-ordinator Signature: _____

National Police Check Service Completed: Yes No Date: ___ / ___ / ___

Co-ordinator Signature: _____

Reviewed: PS Team

Approved: Annamaria Wood – General Manager

Date: January 29, 2013

Date: February 15th, 2013