

Volunteer Application Form

PERSONAL DETAILS						
Mr / Mrs / Ms / Miss Surname: Give	en Names:					
Address:	Postcode:					
Home Phone: Mobile:						
Email Address:						
Do you hold a Driver's Licence? ☐ Yes ☐ No Licence No	o: Class:					
EEO STATISTICAL INFORMATION						
The following information is requested for statistical purposes only.						
I am an Aboriginal or Torres Strait Islander:	Yes □ No □					
I am a person with a disability: :	Yes □ No □					
I am a person of a non-English speaking background: :	Yes □ No □					
If yes, what is your first spoken language?						
EMERGENCY CONTACT DETAILS						
Please list persons to be contacted in the event of an accident or emergency						
Contact 1						
Name: Home Phone: ()_	Mobile:					
Address:	Postcode:					
Relationship to you:						
Contact 2						
Name: Home Phone: ()	Mobile:					
Address:	Postcode:					
Relationship to you:						

VOLUNTEER PLACEMENT QU	ESTIONNAIRE		
Please tell us why you would like to	become a Volunte	eer?	
Do you have any prior experience a	s a volunteer?	□ Ye:	s □ No
If yes, please specify:			
Days of week/times available:			
Do you have any special needs, lim certain jobs? If yes, please provide area where your health and safety v	a detailed explana	tion as this will ass	
Are you interested in volunteering for	or "one-off" events	? □ Yes □ No	
Please select the desired area of	participation:		
 □ Community Services □ Youth Services □ Goulburn Regional Art Gallery □ Museums (Rocky Hill, Waterworl □ Goulburn Mulwaree Library □ Other: 	ks and/or St Clair)		
Please see GMC volunteer role de	escriptions for furth	er information.	
SKILLS			QUALIFICATIONS
Please list the areas of work you are	e interested in?		
Are you a member of any club or or	ganisation related	to the area of worl	k you are interested in?
	REFE	REES	
Name	Phone		Email

DECLARATION

- I am aware that I am ineligible to be considered for, undertake or remain in, child-related volunteer activities if I have been convicted of a "serious sex offence" as defined in the Child Protection (Prohibited Employment Act 1998).
- I sign this application knowing that all the information supplied by me is factual and true. I also acknowledge that any false information will be sufficient reason for discontinuation of your volunteer placement.

Council collects personal information only for a lawful purpose that is directly related to Council's functions and activities. Council is required under the Privacy & Personal Information Protection Act 1998 (PPIPA) to collect, maintain & use your personal information in accordance with the Privacy Principles & other relevant requirements of the PPIPA. For further information or clarification please contact Council's Privacy Officer or refer to Council's Privacy Management Policy at www.goulburn.nsw.gov.au

Signature:	Date:	_//_					
For person under the age of 18 please have your parent or guardian sign this form							
Parent/Guardian Signature:		Date:	/	/	/		

This form maybe submitted in the following ways:

By post addressed to:

The Human Resources Manager Goulburn Mulwaree Council Locked Bag 22 GOULBURN NSW 2580

Email: council@goulburn.nsw.gov.au

Delivered to:

Civic Centre-Customer Service 184-194 Bourke Street GOULBURN NSW