



Volunteer Application Form

The following information is needed to process your volunteer application, ensure we cover you under our insurance policy and offer you appropriate support services. Please complete and return to:
Human Resources, 536 New South Head Rd, Double Bay or Fax to: 9391 7032

Given Names _____

Surname _____ Mr Miss Mrs Ms

Home Address: _____

Postal Address:
(if diff from above) _____

Contact Details: Home: _____ Mobile: _____
E-mail: _____

Date of Birth: _____

**Start date of
volunteering with
Council** _____

**Position name/ title/
area working in** _____

Licence Details:

If required to use a vehicle while volunteering:

Licence No: _____ Class: _____ Expiry Date: _____

Vehicle Details:

If you will be using your vehicle during volunteering hours:

Make: _____ Model: _____ Rego No: _____

Medical details:

Are there any medical problems or are you taking any medication which may effect your volunteering and/or that we need to know about:

No Yes Detail: _____

**Emergency Contact
Person:**

Name: _____

**Relationship to
Volunteer:** _____

Contact details:

Home: _____ Work: _____ Mobile: _____

REFERENCES: *Only applicable if volunteering in Home Library services, EJ Ward, or Meals on Wheels.
May we check references? If yes please provide the details below:*

1st Reference:

First and Last Name:

Contact details:
Relationship to Volunteer:

Home:

Work:

Mobile:

2nd Reference:

First and Last Name:

Contact details:
Relationship to Volunteer:

Home:

Work:

Mobile:

Are you willing to undergo a criminal history check or sign a Prohibited Employment Declaration form? Only applicable if volunteering in Library home services, EJ ward, or Meals on wheels.

Yes No

Services you would like to Volunteer With: (you may tick more than one)

Bushcare Library Home services Library Events (eg: bookfair) Meals on Wheels

EJ Ward Bus Escort EJ Ward Activities Assistant

Local History Centre – collection Maintenance Local History Centre: Oral History

One off community events Cultural and youth events

Other: _____

Availability: Anytime Weekdays only Weekends Only

*Please note for bushcare volunteers, the following days are applicable to the following parks:
Tues: Cooper Park, Wed: Gap Park, Thurs: Harbour View Park, Fri: Trumper Park, Sat: Cooper, Harbour View Park*

Specific Days/Times:

Skills/Experience/Interest – to help us help you get the most out of volunteering in the Community!

Summary of Employment Experience:

Have you worked in a related service before, either in a paid or voluntary capacity? If so please provide some details:

Do you have particular interests, skills, experience, qualifications which may be relevant and/or you may wish to use in volunteering (including ability to speak other languages)?:

What do you want to get out of your volunteering experience?:

I acknowledge that I will receive no financial compensation for my volunteering efforts:

Signature: _____