

VOLUNTEER APPLICATION FORM

PRIVATE AND CONFIDENTIAL

Name _____ Date _____

Address _____

Telephone Number _____ Date of Birth _____

In Case of Emergency

Contact _____ Telephone Number _____

List volunteer history over past 5 years

COMPANY	FROM	TO

Attach 2 written character references and list below

NAME	TELEPHONE NUMBER

Please Circle (if yes – explain)

Have you any injury or condition that could adversely affect your ability to perform all requirements of your position? Yes No

Languages spoken/understood

DECLARATION

I understand that any false or misleading information given in this application may render my volunteer agreement, if I am appointed, liable to termination. I declare that to the best of my knowledge the above information and that submitted in any accompanying document/s is correct.

Print Name _____

Signature _____ Date _____

Available for volunteer work

Prior to commencement of Volunteering and as per legislation Garden Village may require volunteers to undergo a compulsory Australian Federal Police Probity Check (AFP) check on all applicants.