

# Your Logo Here

## Template Volunteer application form

**First name:** ..... **Last name:** ..... **Male / Female**

**Address:** .....

**Suburb:** ..... **Postcode:** .....

**Email:** .....

**Home phone:** ..... **Mobile phone:** .....

**How did you hear about** ..... **?** (Please tick ONE box)

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> Previous interview          | <input type="checkbox"/> Special event        | <input type="checkbox"/> Organisation website  | <input type="checkbox"/> Media: TV/Radio/Newspaper  |
| <input type="checkbox"/> Word of mouth               | <input type="checkbox"/> Rehab service (CRS)  | <input type="checkbox"/> GoVolunteer           | <input type="checkbox"/> Job Network Provider       |
| <input type="checkbox"/> Centrelink                  | <input type="checkbox"/> Friend/Family member | <input type="checkbox"/> Employer organisation | <input type="checkbox"/> Community Work Coordinator |
| <input type="checkbox"/> Counsellor/Doctor/Therapist | <input type="checkbox"/> Phone book           |  |   |

**What is your current work status?** (Please tick ONE box)

- |   |   |  |                                     |
|---|---|--|-------------------------------------|
| <input type="checkbox"/> Full Time Worker | <input type="checkbox"/> Retired        | <input type="checkbox"/> Home Duties       | <input type="checkbox"/> Job Seeker |
| <input type="checkbox"/> Part Time Worker | <input type="checkbox"/> Income Support | <input type="checkbox"/> Traveller/Visitor | <input type="checkbox"/> Student    |

**Do you identify as one (or more) of the following groups?** (If YES – Tick, If NO – Leave Blank)

- |                                   |   |                                     |
|-----------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Disabled | <input type="checkbox"/> Non-English Speaking Background (CALD) | <input type="checkbox"/> Indigenous |
|-----------------------------------|---|-------------------------------------|

Age Group

- |                                |                                |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> 0-17  | <input type="checkbox"/> 35-49 |
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 50-64 |
| <input type="checkbox"/> 25-34 | <input type="checkbox"/> 65+   |

**Volunteering has never been so easy**

# Template

## Volunteer application form

### What is your primary motivation for volunteering? (Please tick ONE box)

- |   |   |   |  |
|---|---|---|--|
| <input type="checkbox"/> Help others/give back to community | <input type="checkbox"/> Using skills/learning new skills | <input type="checkbox"/> Social interaction | <input type="checkbox"/> Centrelink/Job Network referrals    |
| <input type="checkbox"/> Personal satisfaction              | <input type="checkbox"/> Gain work experience/reference   | <input type="checkbox"/> Make a difference  | <input type="checkbox"/> Explore/engage in areas of interest |
| <input type="checkbox"/> To be active/keep busy             | <input type="checkbox"/> Build confidence/self esteem     | <input type="checkbox"/> Practising English | <input type="checkbox"/> Recommended by someone else         |

### What types of volunteer work are you interested in?

Are you interested in volunteering for special events/projects? ☐ Projects Type: .....

e.g. fundraising days, cultural and sporting events, festivals, fun runs ☐ Events Type: .....

Availability: ☐ Mon ☐ Tue ☐ Wed ☐ Thu ☐ Fri ☐ Weekends ☐ On call ☐ Use own transport

### Volunteer Experience

What is your general work history?

What skills, experience or qualifications do you wish to contribute to volunteering?

How would you describe your skill level? (eg. basic, intermediate, advanced)

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Do you speak any language other than English? ☐ No ☐ Yes – specify: .....

Level of proficiency      Written:    ☐ Basic    ☐ Intermediate    ☐ Advanced

Spoken    ☐ Basic    ☐ Intermediate    ☐ Advanced

What kind of voluntary work would you like to do?

Have you done voluntary work before? If yes, what kind and for what organisation?

Do you have any condition or circumstances that would affect the sort of volunteer work you choose?

To which locations or suburbs can you travel to volunteer?

Any other information you would like XXXX to know?

**Referees** – please provide the name and contact numbers of two people who are willing to act as referees for you and who have known you either personally or professionally for at least 12 months.

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_