

CONFIDENTIAL

Junior Volunteer Church Helper Application Form

Junior Volunteer and Church Helper Application Form

C/2.1.2.13

Purpose

Assists church council members/delegates to complete and record the screening of junior applicants who wish to volunteer within the church.

Scope

To be utilised by anyone aged 12-18 years who is expressing interest in a volunteer position within the church, and by anyone over age 18 who requires an alternate recruitment process.

Process

A child or young person aged between 12 years and 18 years may undertake a volunteer activity as a junior volunteer or junior leader after participating in a pre-appointment screening process suitable for their age, maturity, and ability. The flexibility that this role offers, may be utilised for adult workers that would otherwise be excluded from volunteering.

Each part of the application process is to be completed with prayerful consideration of the gifts and skills of the applicant, their suitability to volunteer in the role, and the needs of the Church.

Inclusion

The application process should not be a barrier to persons with a desire to serve or volunteer. Refer to the procedure <u>Managing People</u>, for information about ways to increase the accessibility of the application and interview processes.

Instructions

- 1. You must obtain permission from a parent or guardian, for anyone under age 18, to volunteer with the
- 2. Fill out all sections of this application form, to express interest in volunteering, or for a volunteer role.
- 3. You may prefer to talk with someone instead of completing this form. If that's the case, ask your minister if you can make a time with someone to talk about becoming a volunteer or junior leader, with the Church.
- 4. If you have completed this form, please email, or hand the completed application form to the Safe Church Coordinator, Minister, or the Church Council Chair of the Church you wish to volunteer with.

Applicant details

Applicant's full name:

Preferred name:

Date of birth:

Male:

Female:

Phone number:

Email:

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Address:			
Preferred method of	Mobile	Email	Text message
contact:	Other (provide	e details)	
Parent/guardian/carer's	name:		
Parent/guardian/carer's	contact details:		
Date:			
Consent:			
Is your parent carer or gu Yes / No	ardian aware of th	is application?	
Is your parent carer or gu Yes / No	ardian attending tl	he interview with you?	
Verbal expression	of interest		
□ Verbal process	used		
Details of the person co	mpleting this form	1	
Name:			
Phone number:		Email:	
Address:			
Church Position or relati	onship:		
	ease list your gifts		eneficial in your role volunteering in
which equips you to	volunteer, includir		ic details of previous experience rking or volunteering effectively with

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3.	Work history: Please provide details of the last place where you helped or volunteered, including any helping or volunteering with children or anyone vulnerable.				
4.	Motivation and calling: Please describe why you want to volunteer, including helping or volunteering with children or anyone vulnerable.				
5.	Medical conditions: Please provide relevant information about medical conditions or limitations that may affect your ability to fully participate as a volunteer.				
Re	ferees				
	ame of referee 1:				
	none number:				
	rganisation:				
	osition held:				
	nail/Address:				
	elationship to you:				
N	ame of referee 2:				
Pł	none number:				
0	rganisation:				
Po	osition held:				
Er	nail/Address:				
Re	elationship to you:				

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Applicant's declaration

Please answer every question. Further discussion may be required to understand individual circumstances.

	Yes / No		
Do you have consent from your parent carer or guardian to volunteer in this role?			
Was the parent carer or guardian present for the interview process?			
Do you confirm that the information provided in this document is true and correct?			
Do you consent to the referees listed above being contacted for the purposes stated in this application?			
Do you consent to the church council using and disclosing your personal information in t manner described in the process above?	he		
Do you understand that you can withdraw from this application process at any time with giving reason?	nout		
Applicant's signature			
Name:			
Date:			
Parent/guardian/carer's consent:			
Parent/guardian/carer's name:			
Parent/guardian/carer's contact details:			
Date:			
OFFICE USE ONLY			
Determination, recommendation, comments and conditions:			
Signature of person conducting screening:			
Name: Date:			
Reference to minute of church council meeting: Date:			
Date applicant was notified of outcome:			

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Revisions

Document number		C/2.1.2.13			
Version	Approval date	Approved by	Effective date	Policy owner	Policy contact
3.0	16.05.2024	General Manager Risk and Safeguarding	16.05.2024	General Manager Risk and Safeguarding	Safe Church, Assurance and Support Officer
Next scheduled review		16.05.2027			