|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| First name: | | Click or tap here to enter text. | Family name: | | Click or tap here to enter text. | | |
| Address: | Click or tap here to enter text. | | | | | | |
| State | Click or tap here to enter text. | | Postcode: | Click or tap here to enter text. | | | |
| Phone: | Click or tap here to enter text. | | | | | | |
| E-mail: | Click or tap here to enter text. | | | | | | |
| Date of Birth: | Click or tap here to enter text. | | | | | Gender | Click or tap here to enter text. |

**Your Details**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Have you volunteered before? | | | Yes |  | No | |  | | | | | | | | |
| Do you have access to transport? | | | Yes |  | No | |  | | | | | | | | |
| What is your previous work experience (and what are your key skills?) | | | Click or tap here to enter text. | | | | | | | | | | | | |
| What skills would you like to develop? | | | Click or tap here to enter text. | | | | | | | | | | | | |
| What hobbies/activities do you enjoy? | | | Click or tap here to enter text. | | | | | | | | | | | | |
| Is there any work you are unable to do? | | | Click or tap here to enter text. | | | | | | | | | | | | |
| Do you have (or are willing to get) any licences or certificates *(Please check the options that apply).* | | | | | | | | | | | | | | | |
| Working with children check: |  | | | | | | | Police check: | | |  | | | | |
| Driver’s licence: |  | | | | | | | Medical Check: | | |  | | | | |
| Other: | Click or tap here to enter text. | | | | | | | | | | | | | | |
| **Are you available for?** | |  | |  | |  |  | |  |  | |  |  |  |
| General Volunteering? | | Yes | |  | | No |  | | Special Events? | Yes | |  | No |  |
| Emergency Response? | | Yes | |  | | No |  | |  |  | |  |  |  |

**Other Information** *(the following information is requested for statistical purposes)*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| How did you find out about us? | Click or tap here to enter text. | | | | | | | | | | | | | | | |
| What is your country of birth? | Click or tap here to enter text. | | | | | | | | | | | | | | | |
| Are you from a non-English speaking background? | Yes |  | No |  | If yes, do you need an interpreter? | | | | Yes | | |  | | No | |  |
| Do you speak a language other than English? Which one/s? Click or tap here to enter text. | | | | | | | | |  | | |  | |  | |  |
| Are you indigenous or Torres Strait Islander? | | | | Yes | |  | No | | |  | | | | | | |
| Do you require any support to carry out the roles of interest? | | | | | | | | Yes | | |  | | No | |  | |
| If yes, please specify: Click or tap here to enter text. | | | | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| What is your Work history? | Business | Commercial | Labour | Professional | Trade | Other | If Other, please specify | |
|  |  |  |  |  |  |
| What is your current working status | Employee Casual  Full time  Part time | Home duties | Retired | Self Employed | Student | Unemployed | Visitor | Other |
|  |  |  |  |  |  |  |

**Availability**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **What days/time are you available to volunteer**? *(mark all that apply)* | | | | | | | |
|  | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| AM |  |  |  |  |  |  |  |
| PM |  |  |  |  |  |  |  |
| Evening |  |  |  |  |  |  |  |

**Your Volunteering Interests**

**What causes do you wish to support by volunteering?**

|  |
| --- |
| Animal Welfare  Arts & Culture  Community Service  Disability Services  Disaster Relief  Drug & Alcohol Support  Education  Emergency Response  Environment & Conservation  Family Support  Health Recreation  Homeless  Human Rights  Indigenous  Mentoring  Migrant Support  Museums & Heritage  Seniors & Aged Care  Sport  Veteran & Ex-Service Community  Young People  Other |

**In what areas would you like to volunteer?   
*(Please tick the options that MOST interest you).***

Accounting & Finance

Administration & Office Management

Art, Craft & Photography

Childcare

Companionship & Social Support

Counselling & Help Line

Disability Support

Driving & Transportation

Education & Training

Food Preparation & Service

Fundraising & Events

Garden Maintenance

Governance, Board & Committee

Information, Tour Guides & Heritage

IT & Web Development

Library Services

Marketing, Media &   
 Communications

Mediation & Advocacy

Music & Entertainment

Research, Policy &  
 Analysis

Retail & Sales

Safety & Emergency Services

Second Language

Senior Aged Care

Sport & Recreation

Trades & Maintenance

Tutoring & Mentoring

Working with Animals

Writing & Editing

**Volunteer Authorisation**

I authorise DVCS Volunteers Hub to release information to member organisations, if and when needed, in order to obtain a volunteer position. I also give my consent for my details being entered onto a database to be used for volunteering related purposes. The details provided in this form will not be used for any other purposes.

Signature Click or tap here to enter text. Date Click or tap here to enter text.