

## VOLUNTEER APPLICATION FORM

<b>FAMILY NAME</b>	
<b>FIRST NAME</b>	
<b>ADDRESS</b>	
<b>DATE OF BIRTH</b>	
<b>TELEPHONE (DAY)</b>	
<b>MOBILE</b>	
<b>EMAIL</b>	
<b>PREFERRED DAYS OF WORK</b> (circle)	Monday Tuesday Wednesday Thursday Friday
<b>PREFERRED TIMES</b> (IF NOT FULL TIME) (between 9:00am – 4:00pm)	
<b>PREFERRED AREA OF WORK</b> (circle)	Production Services/Encore Life Skills Office
<b>LICENCES &amp; CERTIFICATES</b> (Tick all appropriate)	<input type="checkbox"/> Motor vehicle <input type="checkbox"/> Forklift <input type="checkbox"/> Medium Rigid (truck) <input type="checkbox"/> First Aid <input type="checkbox"/> Working with Vulnerable Persons Card <input type="checkbox"/> National Police Check (not older than 2 years) <input type="checkbox"/> Other (please specify) _____
<b>NEXT OF KIN AND CONTACT DETAILS</b> (IN EVENT OF EMERGENCY)	
<b>SIGNATURE</b>	
<b>DATE</b>	
<b>IS THIS A CENTRELINK REQUIREMENT?</b> (CIRCLE)	Yes                  No

**Office Use Only:**

AREA OF WORK			
START DATE		END DATE	
	Date	Signature	
NDIS ORIENTATION MODULE (PRIOR TO START)			
MEDICAL (PRIOR TO START)			
WORKING WITH VULNERABLE PERSONS CARD			
POLICE CHECK			
INDUCTION			
SAFETY GEAR			

**Please return to:** General Manager; Self Help Workplace; 414 Hobart Road, Youngtown Tas 7249  
Tel.03 6344 7133 Fax. 6343 0651 Email: info@selfhelp.com.au