



LEETON SHIRE COUNCIL

Preserving the Past, Enhancing the Future

VOLUNTEER APPLICATION FORM

PERSONAL DETAILS (please print)					
Title:	Surname:		First name:		
Mobile Phone:			Home Phone:		
Date of birth? / /			Gender: Male Female		
Are you Aboriginal or Torres Strait Islander?			Yes No		
In which country were you born?					
Do you speak a language other than English at home?				Yes No	
If yes, please specify					
Do you consider yourself to have a disability, special needs conditions or allergies?					Yes No
If yes, please specify					
Are you an Australian citizen or permanent resident?				Yes No	
If no, please state your current visa type					
CURRENT ADDRESS					
Street address					
Postal address					
Suburb		State		Post code	
Personal email address					
CURRENT EMPLOYMENT AND QUALIFICATIONS					
What is your current employment		<input type="checkbox"/> Employed (full time) <input type="checkbox"/> Employed (part time) <input type="checkbox"/> Self-employed <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Other _____			
Are you volunteering due to Centrelink requirements?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you hold a current driver's license?		<input type="checkbox"/> Yes – License Class(es) _____ License Number _____ <input type="checkbox"/> No			

Please include any additional information or comments, such as certificates, first aid certificate, OH&S White card, licenses to operate machinery, skills etc.

AVAILABILITY

Please indicate your availability and preference of days:

Time	Mon	Tues	Wed	Thu	Fri	Sat	Sun
AM							
PM							
ALL DAY							

EXPERIENCE

Please indicate if you have experience in any of the following areas:

- Customer Service / Administration
- General Support Theatre and the Arts
- Multicultural and Youth Sports and Recreation
- Tourism general Tourism - local knowledge and history
- Committee member

Briefly outline any previous volunteer experience (e.g. community groups, service organisations, charities etc.)

INTERESTED AREAS

Please indicate your preferred volunteering areas:

- Visitors Centre Library Golf Course
- Roxy Gardens Community Transport
- Whitton Museum Pools Other

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Why do you wish to volunteer?

What would you like to gain from volunteering?

How did you hear about opportunities to volunteer with Leeton Shire Council?

EMERGENCY CONTACT DETAILS

Name						
Relationship				Work phone		
Mobile Phone				Home phone		
Street Address						
Suburb			State			Post code

Office Use Only

Received By: _____

