

Volunteer Application Form



Volunteer for Gympie Regional Council

Working together to create a better place to live, work and play.

Privacy statement

Gympie Regional Council is collecting your personal information for the purpose of maintaining volunteer programs, rosters and teams. All medical and personal information will be treated as confidential. The collection of this information is authorised under the Local Government Act 2009. Your information will not be given to any other person or agency unless you have given us permission or we are required by law.

Your Contact Details

Name: _____

Address: _____

Home Phone: _____ Mobile Phone: _____

Email: _____

Drivers Licence No: _____ Vehicle Registration: _____

Please tick preferred contact method

Home Phone Mobile Phone Email

Emergency Contact Details

Name: _____

Relationship: _____

Home Phone: _____ Mobile: _____

I am interested in volunteering at:

Gympie Regional Libraries Gympie Regional Gallery Tourist Information Centre
 Major & Community Events Other _____

Please circle either Yes or No

1. Do you have pre-existing health issues that may impact on your ability to perform the duties required?

Yes / No. If yes, please list

2. Physical Requirements of the Position

Note: Applicants with disabilities will be considered on a case by case basis.

Are you able to perform tasks for extended periods whilst in a sitting position and occasionally pushing, pulling or handling objects exerting a force up to 5kg?

Yes / No

If no, please provide details:

Are you able to walk up and down stairs whilst occasionally carrying weights up to 15kg?

Yes / No

If no, please provide details:

3. Are you able to clearly hear directions and instructions being provided at normal speech levels?

Yes / No

If no, please provide details:

4. Have you ever been charged with an offence?

Yes / No

If Yes, please list:

*Depending on the offence, this may automatically disqualify you from volunteering.

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5. Do you have a current Blue card?

Yes / No Sighted Card No: _____

*A condition of Volunteering is the ability to obtain a Blue Card.

6. Permission to Use Photographs and Video.

I _____, AGREE for Gympie Regional Council to take, use and distribute photographs, video or sound recording in order to promote volunteering or the organisation. I allow such use.

Signed: _____ **Date:** _____

In order to assist Gympie Regional Council to match volunteers with areas of need/client requirements, please also provide the following details:

Date of Birth: _____ Country of Birth: _____

Preferred language: _____

What days and times would you like to volunteer?

	MON	TUES	WEDS	THURS	FRI	SAT	SUN
AM							
PM							

Please highlight the skills, knowledge and or experience you bring to this role:

Signed: _____ **Date:** _____