



## **Volunteer Data Form - Archdiocese of Brisbane**

PART A: P	ersonal l	Details										
Surname:						First Name:						
Salutation:						Preferred Name:						
Date of Birth:					ender:	Male	Fema	I Female		Prefer not to disclose		
Home Addre	ess: U	Unit: No:			Street:							
Suburb/Town:						State:			Postco			
Phone No: Home		lome:				Mobile:						
Email:												
Postal Addre		Init:	No:		Street:							
Suburb/Tow	vn:					State:			Postcode:			
Contact details may be used for communication purposes. An email address is essential to enable the provision of legally required mandatory compliance training.												
PART B: Emergency Contacts and Medical Details												
Emergency						Relationship:						
Contact Name:						Contact Phone:						
Any pre-existing condi your duties:		ditions	that may	mpact	your capac	ity to perform	Yes			No		
If yes, specify:												
Unless specified above, by signing this form you certify that you are unaware of any pre-existing injury or illness you have which could be affected by the nature of this work required of the role.												
PART C: V	olunteeri	ing De	tails									
Position Titl												
Parish/Agency/Service		ice:										
Reporting to												
Date Commenced:						Indicate days and times below:						
Monday				Thursda		ay		Sunday				
Tuesday					Friday	Friday			Other relevant information:			
Wednesday					Saturda	ay						
Previous vo	lunteers	or emp	loyees of	the Ar	chdiocese o	f Brisbane, plea	se provi	de de	etails be	low:		
Position:					Date From	:	Date	To:				
Position:			Da			:	Date To:					
Reason for leaving												
Yes			Existing volunteers only (tick box only if this applies) Currently have possession of Parish keys / passes as detailed below:									
Details			,	1, 300		12,3, puo						





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Part D: Screening Requirements											
Blue Card No:			Туре	Type:			Expiry Date:				
Police C		Issue	ed:			<u> </u>					
I have been provided with copies of the Safe Conduct Standards and Prior Conduct Declaration.											
	I have com	pleted Safeguard	ing Train	ing	Year:						
I understand that I must notify the Archdiocese of any changes to my criminal history.											
I agree to complete the NDIS Worker Orientation Module within 1 month of commencement (CCS volunteers only - not applicable to Parish volunteers)											
Current Parish Volunteers STOP here and then sign form at Part G.											
Under the Archdiocesan Safeguarding Children and Vulnerable Adults Prevention and Protection Policy any person wishing to volunteer in child or vulnerable adult related ministries, is required to provide two referees and to undertake other screening requirements.											
Referees – Not related to the volunteer. (New Applicants only)											
Name:	Name:					Phone:					
Name:				Phone:							
Part E: Other Compliance Requirements (If relevant to role/position)											
Driver's L	_icence:				Class:		Exp	res:			
State:		Co	nditions/Lir	mits:			•				
First Aid Cert.:				Issue Date:							
CPR Cer	t.:			Issue Date:							
NDIS Worker Screen:					Type:		Expires:				
Visa Type:		N				Exp	Expires:				
Part F: E	Equal Emp	loyment Opporti	unity (No	t Com	pulsory	')					
Your completion of the following information is for statistical purposes only and will assist in monitoring employment equality and diversity outcomes. Please select if either of these are applicable to you:											
An Indigenous Australian.											
From any other country other than an English speaking background.											
Part G:	Declaration	า:									
I declare that the above details are true and correct and I understand that I must notify the Archdiocese immediately of any change to these details.											
Name: (print)			ature:	ıre:			Date:				
For Parish volunteers, please return the completed form <u>directly to your Parish</u>											
All others, please return to <b>People and Culture Office</b> : GPO Box 282, BRISBANE QLD 4001 or <a href="mailto:hroffice@bne.catholic.net.au">hroffice@bne.catholic.net.au</a>											
Privacy Statement: Privacy collection statement: The Parishes, schools and agencies of the Archdiocese of Brisbane (we, us or our) may collect, use and disclose personal information about you. We collect personal information directly from you and may also collect personal information passively through our website. We collect your personal information to fulfil the mission and directions of our organisation, to administer the sacraments and provide pastoral care to you, to provide you with other services and products you are seeking, to communicate with you about the services and products we offer, to solicit donations and to comply with our legal and regulatory requirements. If the personal information you provide is incomplete or inaccurate, we may not be able to provide you with the services or products you seek. We may disclose personal information about you to our Parishes, schools and agencies and service providers who assist us in operating our organisation. Our Privacy Policy (available on our website or on request) sets out how you can access and ask for correction of your personal information, how you can complain about privacy-related matters and how we respond to complaints. Contact details: Privacy Officer, GPO Box 282, Brisbane, Queensland, 4001, email: privacyofficer@bne.catholic.net.au, telephone: +61 7 3324 3579											
Part H: HR use only											
	sification:										
Commer Name:	its:		Signa	ature:				Date:			
· · · · · · · · ·			Signo					Date.			