

Zoo Volunteer Application Form

Council is collecting your personal information (e.g. name, address, phone number etc), for the purposes as outlined on this form. This information will only be accessed by authorised Council officers and will be handled in accordance with Council's Privacy Statement governed by the *Information Privacy Act 2009*.

Visit <https://www.bundaberg.qld.gov.au/privacy> for further information.

Thank-you for your interest in becoming a Zoo Volunteer. The information on this form will assist us in selecting volunteers and ascertain the most suitable position for you at Alexandra Park Zoo.

After you have completed this application form, please drop it in to Alexandra Park Zoo, or email the completed application form to zoo@bundaberg.qld.gov.au.

Please ensure you have read the 'Volunteering at Alexandra Park Zoo' document, and the 'Alexandra Park Zoo Volunteer Position Description'. These can be found at Council's website here:

www.bundaberg.qld.gov.au/volunteers.

SECTION 1: APPLICANT INFORMATION

Contact person	Title (Mr/Mrs/Ms etc)		Name		
Postal address					
Suburb		State		Postcode	
Daytime phone			Mobile		
Email (required)					
D.O.B. (optional)					
Emergency Contact	Name			Phone	
	Relationship				

SECTION 2: AVAILABILITY

Please indicate the days you will be available to volunteer (Volunteer hours are from 8.30am to 4.30pm)

Mondays	<input type="checkbox"/>	Fridays	<input type="checkbox"/>
Tuesdays	<input type="checkbox"/>	Saturdays	<input type="checkbox"/>
Wednesdays	<input type="checkbox"/>	Sundays	<input type="checkbox"/>
Thursdays	<input type="checkbox"/>	Public Holidays	<input type="checkbox"/>

Please indicate how often you would like to volunteer

More than once per week <i>(please indicate number of days)</i>	<input type="checkbox"/>
Once per week	<input type="checkbox"/>
Fortnightly	<input type="checkbox"/>
Monthly	<input type="checkbox"/>

Do you have any prior commitments which could affect your availability throughout the year?

Is there any further information you would like to provide about your availability, or your shift preferences?

SECTION 3: ABOUT YOU

Are you an Australian citizen or permanent resident? If you are not an Australian citizen or permanent resident, then you will need to supply a copy of your current visa.

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Is your commitment to volunteering at Alexandra Park Zoo connected with outside organisations such as employment agencies and/or Centrelink?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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What was your highest level of education attained, and do you have any relevant qualifications?

Why would you like to volunteer with Alexandra Park Zoo?

Please detail any animal husbandry skills you may have

Do you have any other relevant skills or hobbies which could be of use in your volunteer work?

Do you dislike or have a phobia of any animals, or any of the perceived tasks?

SECTION 4: VOLUNTEER / WORK EXPERIENCE

Please provide a brief summary of your current or previous employment

Name of Workplace	
Position	
Duties Performed	
Name of Workplace	
Position	
Duties Performed	

Please provide a brief summary of current or previous relevant volunteer experience

Name of organisation	
Position	
Duties Performed	
Name of organisation	
Position	
Duties Performed	

SECTION 5: ADDITIONAL INFORMATION

Do you have any disabilities, medical issues or health problems that could affect your ability to perform certain tasks involved with volunteering at the zoo? If yes please provide details

Do you hold a current First Aid certificate? If yes, please provide the expiry date

Have you been vaccinated against tetanus and influenza? If so, please provide details of date last vaccinated. If not, are you willing to be vaccinated?

Do you have any allergies that may be affected by working in an animal environment, for example dust, fur, nuts, etc.? Please provide details of your allergies and any medications you use to manage them.

Do you have a current Working with Children Blue Card?

Yes, Expiry Date: ____/____/____	<input type="checkbox"/>	No	<input type="checkbox"/>
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Do you give permission for Council to undertake a police check?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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SECTION 7: DECLARATION

I _____, declare that all information provided in this application is correct, and that I will advise Bundaberg Regional Council of any changes to the information provided.

Signature	Date / /
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OFFICE USE ONLY			
Date Received		Time	
Receiving Officer		Sign	
Objective Ref			
Interview Time & Date	____:____ am/pm / /	Interviewing officer	