

GIN GIN NEIGHBOURHOOD CENTRE APPLICATION FOR A VOLUNTEER POSITION

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.

We operate a number of services through the Gin Gin Neighbourhood Centre. Please tick if you would prefer to volunteer with in a particular service:		
☐ Gin Gin Neighbourhood Centre	☐ Kolan Community Options	
☐ Computers and Seniors Broadband Kiosk	☐ Happy to work with/in any	
Name:	Telephone:	
Address:	Date of Birth: (optional)	
Occupation (current or previous):		
Cocapanon (carroni or providuo).		
Interests, skills, hobbies:		
Languages spoken:		
Do you have your own transport?		
Have you ever done volunteer work?		
If yes, please give details:		
and the state of t		
Organisations of which you are now a member:		
What type of volunteer work would you like to do? (Please check below)		
☐ with frail aged ☐ driving / comm	unity transport administration	
☐ with people with disabilities ☐ activities assis	tant	
community work with children and families other		
How much time can you give? Weekly(hrs)	Monthly(hrs)	



If you are interested in driving, please provide your drivers licence number and classes:		
Licence No:	Class:	Years driving experience:
What interests you in volunte	eering at the Gin Gir	in Neighbourhood Centre?
Where did you hear about us		
Please provide the name and address of two referees:		
1.		2.
I agree to a Positive Notice Clearance Application? (This ☐ YES ☐ NO		 ild Related Employment Check / Federal Police ry check)
Is there anything else you would like to share with us?		
(Name or Signature)		(Date)