

## **DEVONPORT CITY COUNCIL**

ABN: 47 611 446 016

PO Box 604 Devonport TAS 7310 – 17 Fenton Way Devonport Telephone 03 6424 0511

Email council@devonport.tas.gov.au Web www.devonport.tas.gov.au

Lasted Update: 30.03.2017

## **Devonport City Council Volunteer Registration Form**

Applicants Title (	Mr, Ms,	
Sir, Mrs)		
,		
Applicant's Name		
	ı	
Contact	Phone	Mobile:
Details	Home:	
	Email	
Address		
Date of Birth		
About You:		
Why are you		
interested in		
volunteering with	n l	
Devonport Council?		
What type of		
volunteering inte	erests	
Aon ś		
Skills and Interests	••	
What hobbies or		
interests do you have?		
Please list any ski		
you possess that may		
support this		
application		
Do you have an	У	
formal educationon or		
trade certificates?		
Do you have any		
previous work/		
volunteer experience		
paid or unpaid?		
Please detail		







Do you have your own transport?					
Do you have Comprehensive Motor Vehicle Insurance Cover? (If applicable)					
Do you have a current Driver's Licence?		Drivers licence number		Expiry Date	
Do you have a current Working with Vulnerable People Registration card?		Card number		Expiry Date	
Have you had a Na Police check within last 12 months?		Date received			
Restrictions:					
Do you have any pre existing medical restrictions or special needs that may affect the type of work you do as a volunteer?					
If you need any particular supports in order to perform a volunteer role, please specify:					
Emergency Contact:					
Person to contact	Name	:	Phor	ne Home:	
in an emergency.		tionship:		Work:	
				Mobile:	
Referees:					
Referees. Please provide two	Nam	e:	Nam	ne:	
·		do you know this referee:		How do you know this referee:	
about your past work/ volunteer experience.		ə:		ne:	

<b>Additional Info</b>	oramtion:
------------------------	-----------

Is there anything	
else you would like	
to tell us about	
your application?	
Please list details	
here:	

Tick ( $\sqrt{}$ ) Location/s of Interest

Bass Strait Maritime Centre	Community Events, Activiteis and Programs	Devonport Jazz Festival	Devonport Regional Gallery	Devonport Emergency Volunteer	Home Hill	Julie Burgess	Visitor Information Centre

Availability: Please indicate the days and times when you are available to volunteer.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM/PM							
AM/PM							

## As a volunteer the following conditions apply:

Volunteers over 15 years of age on the date of application.

No payment will be made to you by Council.

Must be willing to provide (less than one year old) or obtain a current National Police Check. Some positions will require a Working with Children Check (WWCC). Council will reimburse the cost upon providing a copy of your completed WWCC if you don't have a current WWCC. Some volunteering roles require health assessments to ensure the volunteer is fit to perform the inherent requirements of the role.

Only while you are assisting Council in your volunteer role, and while your assistance is approved and/or known by Council, you may be covered for Public Liability Insurance. While acting as a volunteer, a limited personal accident insurance cover is provided by Council subject to the terms and conditions of the policy.

Should any incident or near miss (resulting in injury or damage to property or any other parties) occur to you while you are acting as a volunteer of Council, you must notify your Supervisor immediately, or as soon as practicable.

Council's Motor Vehicle Insurance Policy will not cover costs incurred by volunteers driving private vehicles or uninsured vehicles, comprehensive car insurance is recommended. Completion of this form is an expression of interest only and does not infer in any way the offer of a placement with Council.

Council's Personal Accident Insurance Policy covers up to 90 years of age, therefore any Voluntary work that they may undertaken by Volunteers over 90 years of age would not be covered by this Insurance. We do not want to discourage Volunteering due to this, and we encourage them to actively continue Volunteering and appreciate their contribution and commitment.

I confirm that I have read and understand the above mentioned conditions	Signature:
	Date:

Please return completed form to:
Community Development & Volunteer Coordinator,
Devonport City Council, 17 Fenton Way, Devonport.
council@devonport.tas.gov.gu