

VOLUNTEER Application

As a volunteer you have an important role in assisting us to improve our services for the benefit of our patients, residents, clients and the community. REDHS have very clear requirements to ensure our volunteers maintain the values of REDHS and its standards across the health service.

To be eligible to become a volunteer at Rochester and Elmore District Health Service (REDHS), all volunteers must:

- Be 16 years or older (anyone under 18 must have parental/guardian permission)
- Undergo a National Volunteer Police Check (paid for by REDHS)
- Complete a Working with Children Check (if required for your role as a volunteer)
- Complete relevant orientation and training
- Attend ongoing information and education sessions
- Sign and agree to our Confidentiality Agreement/Code of Conduct
- Volunteer according to the REDHS values of **Respect**, **Equity**, **Diligence**, **Honesty** & **Service**
- Complete a Volunteer Details Update Form annually to maintain and record accurate changes in availability or contact details

***Please note Section B is optional for you to complete.**

Section A

Please fill out the following details (circle option)

Details	
First Name	
Surname	
Prefix	Mr/Mrs/Miss/Ms
Address	
Post Code	
Date of Birth	/ /
Phone	(H) (W)
Number(s)	(M)
Emergency Contacts	Relationship: Phone:
Email Address	
Gender	Male/Female

*** Section B- OPTIONAL**

Please answer the following questions (circle option)

Are you a Torres Strait Islander?	Yes	No
Do you speak a language other than English?	Yes	No
If yes, please specify language:.....		
Do you have a disability?	Yes	No
Do you have a mental health issue?	Yes	No
Are you employed?	Yes	No

Section C

How did you find out about volunteering with REDHS?		
Local Paper	Voluntober Promotion	Friend/Relative
News Paper	Website	New to area
Via own experience with organisation	Other:.....	

Please list any previous volunteer experience:

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Section D

Note: Applicants will be required to undergo a National Police Records Check as per the Department of Human Services (DHS) Policy. DHS will be notified of any disclosable record and the nature of that record.

Have you been convicted of any offence of any nature? Yes No

If yes, please give provide details of the offence and date of the offence:

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Section E

Please give details below of anything that might affect your ability to perform the duties required or that might affect your safety or the safety of others, include:

- Any relevant medical conditions or incapacity;
- Any specific training needs;
- Any special facilities you may need;

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Note: Failure to disclose a medical condition or incapacity which may affect your ability to perform the position, or might affect your safety, or the safety of others, may be grounds for denying a future claim for compensation under the Accident Compensation Act.

Section E

Referees (please insert name and contact number)

1.		Ph:
2.		Ph:

Signature of applicant Date/...../.....

Reviewed by Volunteer Coordinator Date/...../.....

Section F

What is your primary motivation for volunteering? (Please tick ONE box)

Practice English		Help others/Give back to the community	
Explore/Engage in areas of interest		Personal satisfaction	
Centrelink/Duke of Edinburgh Requirement		To be active/Keep busy	
Social Interaction		Using skills/learning new skills	
Make a difference		Gain work experience/reference	

Please indicate which role you would be interested in:

Support patients and their families	
Support behind the scenes	
Support visitors and the members of the Public	
Support Café Red	
Support Administration	
Support residents at meal times	
Support activities with driving Car and/or Bus	
Support maintenance	
Support activities/lifestyle	

Availability (Please circle days and times that you are available)

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning	Morning	Morning	Morning	Morning	Morning	Morning
Lunch	Lunch	Lunch	Lunch	Lunch	Lunch	Lunch
Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon
Dinner	Dinner	Dinner	Dinner	Dinner	Dinner	Dinner
Evening	Evening	Evening	Evening	Evening	Evening	Evening

Please list any relevant Qualifications, Skills and Experiences below:

	Formal Qualifications: (E.g. Diploma, Degree, Trade Certificate etc.)
	Other Training/Certification (E.g. First Aid Certificate, Advanced Driving etc.)
	Experience/Skills (E.g. Computer skills etc)

	Interests/Hobbies
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