



Appendix 5.17

VOLUNTEER APPLICATION FORM

PERSONAL DETAILS:

Name: _____ D.O.B. ____/____/____

Address: _____

Telephone: (Home) _____ (Mobile) _____

Email: _____

Hours Available _____ or Days Available _____

Own transport: Yes No

Do you have a suitability card (Blue card): Yes No

If Yes: Number _____ Expiry Date: ____/____/____

Why are you interested in volunteering your time at Queensland Youth services?

What activities/programs would you be interested in assisting?

Available for commencement from ____/____/____ to ____/____/____

What experience/skills do you have relevant to youth work? (please attach your C.V.)

Signed _____ Date ____/____/____

Office Use

Induction completed: Yes No

Suitability card sighted / applied for: Yes No

Manager Signed _____ Date ____/____/____