



## Volunteer Application Form

**Applications can be posted to:** 101 Lake Terrace East, Mount Gambier or left at any of our offices or  
**Emailed to:** [volunteers@boandik.org.au](mailto:volunteers@boandik.org.au)

Name:	Mobile no:
Address:	
Birthday:	Telephone no:
Email:	
Preferred areas of volunteering:	
What are your interests?	
Do you have family and/or friends that are current/recent residents at Boandik? <input type="checkbox"/> yes <input type="checkbox"/> no	
What are your skills?	
What days and times would you be available to volunteer?	
<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday	
Are you prepared to use your driving skills as a volunteer?	
a) In a Boandik vehicle	<input type="checkbox"/> yes <input type="checkbox"/> no
b) In your own vehicle	<input type="checkbox"/> yes <input type="checkbox"/> no
If so please supply:	
Licence no:	Expiry date:
Class:	
Do you speak any other languages? <input type="checkbox"/> yes <input type="checkbox"/> no	
If so which languages:	

**Please provide a copy of a current national criminal history certificate (less than 3 years old).**

If you have lived overseas as an adult a statutory declaration is also required.

If you do not have a current criminal history check then please complete the application for national criminal history certificate form and lodge with local police station. By signing this form I acknowledge that a copy of the national criminal history certificate will be retained by Boandik.

### Emergency Contact

In an emergency, who should we contact?	
Phone no:	Relationship/connection:

Have you read the Boandik volunteers handbook and do you understand the role, rights, and responsibilities of Volunteers at Boandik     yes    no

Are you prepared to accept a trial period of four weeks following which time you will discuss your role in the volunteer program with the volunteer coordinator?     yes    no

Please show the names, addresses and telephone numbers of two people who would be able to provide a character reference for you

1. Name:	2. Name:
Town:	Town:
Phone:	Phone:
Relationship/connection:	Relationship/connection:

Please attach copies of two written references, if you have any.

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*(Signature of applicant)*

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*(Date)*

Boandik thanks you for your interest in our volunteer program.