



# VOLUNTEER APPLICATION FORM

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Email: \_\_\_\_\_ Contact phone no: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Male  Female  Non-Binary  Not Stated

Please tick all positions that interest you (**NOTE: All new volunteers are subject to 3 months' probation**)

**Community Worker (Interviewer)**  
You must complete a 50-hour accredited training unit CHCCCS004 (*Assess Co-Existing Needs*).  
*Details will be provided at interview.*

**Receptionist**  
Position involves greeting clients and visitors, answering telephones and providing information.  
Good communication skills are required.

**Administration**  
Data entry, collation and entry of statistics. Keyboard skills and attention to detail.

**Lunch Program** (*Note: Lunch Shift is: 11:30am - 2:30pm*)  
Lunch program runs 4 days a week (*Monday, Tuesday, Thursday, Friday*)  
Tick Availability:  Monday  Tuesday  Thursday  Friday

## Volunteering availability

Please tick all days and times you are available to volunteer:

**Morning shift:** 9:30am -12:30pm

**Afternoon shift:** 12:30pm - 3:30pm

### Monday

Morning  
 Afternoon

### Tuesday

Morning  
 Afternoon

### Wednesday

Morning  
 Afternoon

### Thursday

Morning  
 Afternoon

### Friday

Morning  
 Afternoon

How did you hear about Community Support Frankston?

Friend/Family  GoVolunteer  Newspaper  
 CSF website  Seek  Other: please specify  
 CSF Brochure  Volunteer Resource Centre \_\_\_\_\_  
 Frankston City Council  Job Network Provider

**Community Support Frankston [www.frankston.net](http://www.frankston.net)**

Phone: 9783 7284 Fax: 9783 7731 Email: [csf@frankston.net](mailto:csf@frankston.net)

ABN 95 426 151 625 Registered Incorporation Number A0000431J

(Deductible Gift Recipient and Income Tax Exempt charity entity (Income Tax Assessment Act 1997))

## Please tell us more about yourself

Tick your main reason for volunteering:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Recommended by a friend       | <input type="checkbox"/> Gain work experience   | <input type="checkbox"/> Build confidence   |
| <input type="checkbox"/> Help others/make a difference | <input type="checkbox"/> Centrelink requirement | <input type="checkbox"/> Social interaction |
| <input type="checkbox"/> Student placement hours       | <input type="checkbox"/> Learn new skills       | <input type="checkbox"/> Other _____        |

1. Can you commit to volunteering for a 12 month period?  Yes  No

2. Briefly, what is your general work history? (Attach copy of your resume if you have one)

3. Do you have previous volunteering experience? If yes, what did you do and for which organisation?

4. Do you have skills, experience or qualifications you think will contribute to volunteering at CSF?

5. Can you speak any languages other than English?  No  Yes - please specify \_\_\_\_\_

6. Do you have any condition or circumstance that would affect your capacity for volunteer work?  
(If successful, CSF will pay for a mandatory Police Check and Working with Children Check)

Please provide the names of two people who have **known you professionally or personally for at least 12 months** and are willing to act as referees for you:

1. **Name:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Organisation:** \_\_\_\_\_ **Email:** \_\_\_\_\_

2. **Name:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Organisation:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return completed form to Operations Coordinator, 35 Beach Street, Frankston 3199**

### Your Information and The Privacy Act

Community Support Frankston Incorporated (CSF) respect and acknowledge the privacy of individuals. The information we are seeking is for the purposes of providing services or to carry out our functions. Under the provisions of the Privacy Act the information being collected by CSF will be held securely and no information will be passed on to any other person or entity without your written consent. You have a right of access to, and alteration of, incorrect personal information concerning yourself in accordance with the Privacy Act.