

VOLUNTEER APPLICATION FORM

Pink Huddle Inc.

Personal / contact details:

Date	/ /
Name	
Address	
Phone 1	
Phone 2	
Email address	
Preferred method of contact	
Current occupation / study	<input type="checkbox"/> Work <input type="checkbox"/> Study <input type="checkbox"/> Full time <input type="checkbox"/> Part time <u>Details:</u> <input type="checkbox"/> Work <input type="checkbox"/> Study <input type="checkbox"/> Full time <input type="checkbox"/> Part time <u>Details:</u>
Emergency Contact Details: Name: Relationship to you: Phone 1: Phone 2:	
Birthday	

Referees. Please provide the name and contact details of at least two referees:

Name: Male Female

Phone1: Phone2:

Relationship to you:

Name: Male Female

Phone1: Phone2:

Relationship to you:

Name: Male Female

Phone1: Phone2:

Relationship to you:

Experience and qualifications. Please provide details of experience relevant to this role

Please tick any of these skill areas if they relate to you:

- Training or education in teaching or tutoring
- Experience working with children with special needs
- Speciality knowledge in a particular subject area
- Experience working with young people
- Experience cooking and preparing food

Please elaborate on these experiences in the space below:

Languages spoken

Other voluntary work

Hobbies / Interests

Why are you interested in becoming a Pink Huddle volunteer? In what area would you like to volunteer?

Please indicate your availabilities in the space below

Where did you hear about this program?

Personal Information:

Age

<18 18-25 26-35 36-45 46-55 55+

Gender

Male Female

Language spoken at home?

Highest education qualification achieved?

Privacy statement:

The personal information on this form is being collected for the purposes of recruiting and selecting volunteers wishing to work with Pink Huddle Inc. The information may also be required for evaluation purposes.

Please check if you are giving up permission to complete a background check on you.

By signing this form I attest that the information supplied is true and accurate.

I understand that submitting this application form does not automatically register me a volunteer tutor but that there is a selection process including completion of a satisfactory Working With Children Check and participation in training. I confirm that I am willing to volunteer as a tutor for at least a six month period and to attend at least two Pink Huddle community activities.

Signature:

Name:

Date:

Pink Huddle Inc. is committed to the safety and wellbeing of all children and young people accessing our service. We support the rights of the child and will act without hesitation to ensure a child-safe environment is maintained at all times. We also support the rights and wellbeing of our staff and volunteers and encourage their active participation in building and maintaining a secure environment for all participants.