



# Queensland Police - Citizens Youth Welfare Association

A.B.N. 58 009 666 193

All correspondence to be addressed to:  
**Chief Executive Officer**  
**QPCYWA**

**G.P.O. Box 1440**  
**Brisbane Qld. 4001**

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## VOLUNTEER APPLICATION FORM

### PART 1 - PERSONAL INFORMATION

Vers 3 Apr08

<b>SURNAME:</b>				(Mr/Mrs/Miss/Ms)
<b>GIVEN NAMES:</b>	Preferred Name:			
<b>ADDRESS:</b>				
	<b>POST CODE:</b>			
<b>TELEPHONE NUMBERS:</b>	(Home)			
	(Work)			
	(Mobile)			
<b>EMAIL ADDRESS:</b>			<b>DATE OF BIRTH:</b>	
<b>DRIVER'S LICENCE NO:</b>		<b>CLASS:</b>		<b>EXPIRY DATE:</b>

**Special Note: Proof of identity needs to be provided at interview.**

### PART 2 - WORK EXPERIENCE/SKILLS (VOLUNTARY OR PAID)

#### CURRENT POSITION (if relevant)

<b>Title:</b>	<b>Organisation:</b>
<b>Date(s) of Employment:</b>	
<b>Main Responsibilities:</b>	
<p>.....</p> <p>.....</p>	

#### PREVIOUS POSITIONS / EXPERIENCE YOU CAN BRING TO QUEENSLAND POLICE-CITIZENS YOUTH CLUBS

*(Please give Title, Dates of Employment, Organisation and major responsibilities for all positions held over the **past 7 years**. Attach a separate sheet if necessary)*

#### WHAT TYPE OF VOLUNTARY WORK WOULD YOU LIKE TO BE INVOLVED IN?

<input type="checkbox"/> Coaching	<input type="checkbox"/> Transport	<input type="checkbox"/> Fundraising/Marketing
<input type="checkbox"/> Activity Support	<input type="checkbox"/> Administration	<input type="checkbox"/> Committee Member
<input type="checkbox"/> Childcare	<input type="checkbox"/> Maintenance/Grounds	<input type="checkbox"/> Other, specify:

#### STATE BRIEFLY WHY YOU ARE INTERESTED IN VOLUNTEERING FOR THE POLICE-CITIZENS YOUTH CLUBS?

.....

.....

#### PROFESSIONAL / BUSINESS / PERSONAL REFEREES *(Please provide current contact details for your Referees)*

1.	Relationship:	Phone:
2.	Relationship:	Phone:
3.	Relationship:	Phone:

**PART 3 – RESTRICTIONS / LIMITATIONS / REASONABLE ADJUSTMENT REQUIREMENTS**

**Special Note:** QPCYWA requires that all prospective volunteers obtain a [Volunteer Suitability/Blue Card](#) prior to commencement to verify that you do not have a record which might preclude you from volunteering with us.

**Do you already hold a current Blue Card?** If you do, we are required to check that it's still current. Please complete [the Authorisation to Confirm a Valid Blue Card/Application check form](#) and hand it to PCYC for checking.

Do you know any reason which could include legal, physical or personal restrictions, which would prevent you from undertaking all of the duties as a volunteer within the PCYC?  Yes  No

If Yes, please provide details -

Nature of Restriction (Conviction, etc)	Date	Penalty Imposed (if applicable)

**PART 4 – AVAILABILITY & VOLUNTEERING PREFERENCES**

**At what times/days/frequency are you available to volunteer?**

<input type="checkbox"/> AM	<input type="checkbox"/> PM	Preferred Times ⇒
<input type="checkbox"/> Weekdays	<input type="checkbox"/> Weekends	Preferred Days ⇒

What might be your **level of commitment/availability**?

<input type="checkbox"/> On Call	<input type="checkbox"/> Weekly	<input type="checkbox"/> Fortnightly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Ongoing
<input type="checkbox"/> Up to 16 hours per week		<input type="checkbox"/> More than 16 hours per week		

<b>Where would you like to volunteer?</b>	<input type="checkbox"/> Nearest Club to my home address	<input type="checkbox"/> Other Club. Specify.....
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Do you have your own transport?  Yes  No

**Are you prepared to use your own vehicle?**  Yes  No  
*(please note that reasonable and documented vehicle usage costs can be reimbursed)*

**PART 5 - HOW YOU HEARD ABOUT US**

How did you hear about the PCYC?	Current Employment Status
<input type="checkbox"/> Previous Volunteer Experience	<input type="checkbox"/> Full Time
<input type="checkbox"/> Word of Mouth	<input type="checkbox"/> Part Time
<input type="checkbox"/> Newspaper/Brochure/Flyer	<input type="checkbox"/> Job Seeking
<input type="checkbox"/> Volunteering Queensland	<input type="checkbox"/> Retired
<input type="checkbox"/> Internet (Who?)	<input type="checkbox"/> Home Duties
<input type="checkbox"/> PCYC Club	<input type="checkbox"/> Student
<input type="checkbox"/> Other, please advise	<input type="checkbox"/> Other, please advise

**PART 6 - EMERGENCY CONTACTS**

1.	<b>Phone:</b>	(Home)	(Work)
	<b>Relationship:</b>	(Mobile)	
2.	<b>Phone:</b>	(Home)	(Work)
	<b>Relationship:</b>	(Mobile)	
3.	<b>Phone:</b>	(Home)	(Work)
	<b>Relationship:</b>	(Mobile)	

I certify that the information stated in this application is true and correct in all detail. I fully understand that any false, misleading or incomplete information stated by me in this application may lead to immediate separation from the PCYC.

<b>SIGNED:</b>	<b>DATED:</b>
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## PART 7 - PROOF OF IDENTITY

Information collected on this form will not be used or disclosed other than to assess your suitability for a voluntary position with the PCYC. If you are not responding to a particular vacancy, your details will be kept on file for three months then destroyed.

**BEFORE YOUR APPLICATION CAN BE PROCESSED, YOU MUST ALSO PRESENT ORIGINAL DOCUMENTS THAT CONFIRM YOUR IDENTITY.**

You will need to provide **one** of the following **three combinations** of documents to confirm your identity:

### COMBINATION 1 – TWO DOCUMENTS

- **One** document from **category A**, and
- **One** document from **category B**

**NOTE:** If neither of these documents shows your current address, you will also need **one** document from **category C** that shows your current address.

### COMBINATION 2 (IF YOU CANNOT PROVIDE COMBINATION 1)

- **Two** documents from **category B**, and
- **One** official document that includes your photograph

**NOTE:** If none of these documents shows your current address, you will also need **one** document from **category C** that shows your current address.

### COMBINATION 3 (IF YOU CANNOT PROVIDE ALL THE DOCUMENTS FOR COMBINATION 1 OR COMBINATION 2)

- **At least three** documents from **category C** that show your name and current address, and
- **One** official document that includes your photograph and signature.

**PLEASE NOTE:** These documents must be no more than 12 months old. If you choose this combination to confirm your identity, your application may take longer to process.

### CATEGORY A

- Current Driving Licence**  
Issued by an Australian State or Territory

- Current Passport**

- Birth Certificate**  
Issued by the Registrar of Births, Deaths and Marriages

### CATEGORY B

- Medicare Card**  
Issued by the Health Insurance Commission

- Centrelink Card**  
Issued by Centrelink

- Department of Veterans' Affairs (DVA) Card**  
Issued by DVA

- Credit Card or Account Card**  
Issued by a financial institution in Australia

### CATEGORY C

- Motor Vehicle Registration or Insurance Papers**

- Property Rates Notice**

- Home Insurance Papers**

- Utilities Bills**  
e.g. telephone, electricity or gas bill

- Bank Statements**  
Showing your residential address

**Branch Manager/Volunteer Services Manager to complete:**

- I have sighted original documents as required by Category  and Category  (as applicable)
- Copies are attached.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_