

Volunteer details

First name _____ Last name _____

Medical information

Do you have any medical conditions we may need to know about (e.g. allergies, asthma, diabetes, epilepsy)? Yes No
If Yes, please detail below:

Other information

Is there anything else we need to be aware of in relation to you volunteering at the College? Yes No
If Yes, please detail below:

Emergency contact

Name _____ Relationship to you _____

Address _____ Phone number _____

Privacy collection notice

Your personal information (including sensitive information) will be collected and handled in accordance with our [Privacy Policy](#) and [APP 5 Collection Notice](#), both of which can be found on our website and will be updated from time to time.

Declaration

I declare that I have never:

1. Been charged with any form of sexual offence or any offence against a person.
2. Been dismissed from any employment or contract or had my services as a volunteer terminated on the grounds that I was involved in improper conduct.
3. Resigned from any employment contract or volunteering activity following allegations that I was involved in improper conduct.

As a volunteer of Portside Christian College, I agree to:

1. Carry out volunteer duties in a manner consistent with College standards and values.
2. Discuss any concerns regarding College matters with my supervising staff member or a member of the College Executive.
3. Maintain the confidentiality of all information to which I am exposed while serving as a volunteer, whether this information involves a single staff member, volunteer, student, parent or other person or overall College business.
4. Abide by the terms and conditions detailed in the Volunteer Policy and Child Safe Environment Policy and other related policies.
5. Not represent the College (e.g. answer questions of visitors, media or officials) or otherwise behave in a way that would imply that the volunteer speaks on behalf of the College.
6. Take all reasonable steps to protect my own health and safety as I carry out this role.
7. Respect the rights, dignity and worth of every person, regardless of their abilities, gender, religion or cultural background.
8. Respect the decisions of educators/staff and teach children to do likewise.
9. Focus on encouraging children's efforts and learning.

10. Refer all requests for confidential College information to the supervising staff member.
11. Complete the sign in and out processes on arrival and departure, during regular College hours, as well as signing in at OSHC and ELC services, if applicable.
12. Wear the provided College name badge when on duty, and return it when signing out.
13. Be dressed appropriately for my role.
14. Notify the College as soon as practicable if I am unable to fulfill my volunteer commitment.
15. Promote and protect the safety and wellbeing of children and young people by:
 - a. Being alert to children and young people who are, or may be at risk of harm and reporting to the Child Abuse Report Line.
 - b. Reporting any suspicions of harm to the most senior position on duty when at the College.
 - c. Referring all student concerns or behavioural issues to the supervising staff member.
 - Listening to student concerns and respond quickly, fairly and transparently to any serious complaints made by a child.
 - Displaying exemplary behaviour and be a role model to students.
 - Treating all children at the College equally, honestly and respectfully.
 - Maintaining clear boundaries of appropriate behavior with students.

I will not:

1. Work unsupervised with students, have inappropriate contact with students, or encourage affection or intentional physical contact with students.
2. Display any bullying or other intimidating behaviours.
3. Use, or have in their possession, illicit substances while on College premises or whilst attending College activities.
4. Enter College premises or attend College activities while under the influence of alcohol or illicit substances.

I will undertake induction and training with regard to:

- Responding to harm or the suspicion of harm
- Work Health and Safety
- Duty of Care to Students
- Privacy and confidentiality.

I understand that other additional training may be required for certain tasks.

I have supplied a current Working with Children Check to the College.

I understand that if I breach any of the above agreements my services as a volunteer may be terminated.

I certify the accuracy of the information provided.

VOLUNTEER

Name _____ Signature _____ Date _____

Witness Name _____

Witness Signature _____ Date _____

COLLEGE PRINCIPAL (or DELEGATE)

Name _____ Signature _____ Date _____

Please return this form to: Portside Christian College Administration, 1 Causeway Road, New Port, SA, 5015