

## Volunteer details

First name \_\_\_\_\_ Last name \_\_\_\_\_  
Date of birth \_\_\_\_\_ Mobile number \_\_\_\_\_  
Email address \_\_\_\_\_  
Address \_\_\_\_\_

## Areas of interest

Please tick the areas you are interested in volunteering in:

- |  |  |
|--|--|
| <input type="checkbox"/> Early Learning Centre (ELC)             | <input type="checkbox"/> Out of School Hours Care (OSHC)     |
| <input type="checkbox"/> Learning Assistance Program (LAP)       | <input type="checkbox"/> Excursions                          |
| <input type="checkbox"/> Classroom reading/support               | <input type="checkbox"/> Parents and Friends Committee (P&F) |
| <input type="checkbox"/> Conservation and Land Management (CALM) | <input type="checkbox"/> Sports day/athletics carnival       |
| <input type="checkbox"/> Traffic duty                            | <input type="checkbox"/> Sporting coach for _____            |

## Volunteer history

How many years have you been associated with the College? \_\_\_\_\_

Do you have any members of your family attending the College?  Yes  No *If Yes, please list them:*

Have you been a volunteer at another organisation?  Yes  No *If Yes, please provide details:*

## Referee details

### Church

*If you attend a church, please provide the details below. Otherwise, please leave blank.*

Church name \_\_\_\_\_  
Pastor's name \_\_\_\_\_ Contact number \_\_\_\_\_

### Other referees

*Please provide two character referees (e.g. your employer, a College staff member). Referees cannot be related to you.*

Referee name \_\_\_\_\_  
Relationship to you \_\_\_\_\_ Contact number \_\_\_\_\_

Referee name \_\_\_\_\_  
Relationship to you \_\_\_\_\_ Contact number \_\_\_\_\_

## Privacy collection notice

The Australian Privacy Principles (APPs) require the College to notify individuals of the following matters when collecting personal information from them:

1. In applying to volunteer at Portside Christian College (the College), you will be providing the College with personal information.
2. We will collect the personal information you provide us (for example, the information in this form and any supporting documentation) in order to assess your application. We may also make notes and prepare a confidential report in respect of your application.
3. We may collect personal information about you from others (e.g. referees).
4. You agree that we may store this information for as long as required under our College policies.
5. If you do not provide all the information requested you will not be able to volunteer at the College.
6. We will not disclose this information to a third party without your consent unless we are otherwise permitted to under the law.
7. The College has a policy of conducting volunteer screening checks (e.g. personal references, working with children checks).
8. Your personal information will not be disclosed to any overseas recipients.
9. Information, photographs and/or videos that include volunteers participating in College activities may be published in College publications and on our website.
10. If you provide us with the personal information of others (e.g. referees, emergency contacts), we encourage you to inform them that you are disclosing that information to the College and why.
11. The College's *Privacy policy (College community)* on the College's website contains further information about the College's general information handling practices including:
  - How you may seek access to and correction of your personal information which the College has collected and holds.
  - How you can make a complaint about a breach of the APPs and how the complaint will be handled.

Last Updated May 2021

## Signature

- I consent to the collection and handling of my personal information, including sensitive information, in accordance with the College's Privacy Policy (College community) and APP 5 Collection Notice, both of which are on the College's website and will be updated from time to time. If my consent is withdrawn, I understand the College may not be able to proceed with my application.
- I have attached my completed Working with Children Check (if available or please let us know if you would like us to start the application process on your behalf).

Your signature \_\_\_\_\_ Date \_\_\_\_\_

## Returning details

Please return this form, along with your completed Working with Children Check (if available) to:

Portside Christian College Administration  
Our street address is: 1 Causeway Rd New Port SA 5015  
Our postal address is: PO Box 6188, West Lakes Shore SA 5020  
Email: [tania.bondarenko@portside.sa.edu.au](mailto:tania.bondarenko@portside.sa.edu.au) or 08 8341 5133

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### Office Use Only (Completed by the Principal or their delegate)

Is this application approved?  Yes  No

Name \_\_\_\_\_ Position \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_