



**Position  
Details**

Application to volunteer in  
(tick 1 or more)

- Aged Care
- Café
- Administration / Wards
- Gardening

**Personal  
Details**

Family Name \_\_\_\_\_

Given Name(s) \_\_\_\_\_

Address \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Date of Birth    /    / \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

**Education  
and  
Training**

Brief history of Education and Training \_\_\_\_\_

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**Employ-  
ment and  
Volunteering  
History**

Brief history of previous Employment and/or Volunteer History \_\_\_\_\_

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*Continued over*



**Police Certificate** In the past 10 years, have you been convicted by a court of any criminal offences?  Yes  No

You will be required to supply a Police Certificate every 3 years. There will be no charge for the Police Certificate if authorised by the CEO at North Eastern Community Hospital.

**Medical Issues** Do you know of any reason why, if appointed, you would be unable to carry out the full requirements of the role?  Yes  No

If yes, please give details

Are there any reasonable actions NECH could take to accommodate the problem above so that you would be able to perform the position? For example, reasonable modifications to a work station, work equipment or work conditions.

**Additional Information** Please add, any additional information you wish to be considered in support of your application that is relevant (or on a separate sheet)

Please provide details of a suitable referee (e.g.: previous volunteer supervisor)

Name	_____
Contact Number	_____
Position	_____

I declare that to the best of my knowledge, the above information and that submitted in any accompanying document(s) is correct.

Signed \_\_\_\_\_ Date    /    /

*Thankyou*