



Contact Details:

Postal Address: PO Box 177, Macksville NSW 2447
Telephone: (02) 6568 2555

Office Location:

44 Princess Street, Macksville NSW 2447

Website:

www.nambucca.nsw.gov.au

Email:

council@nambucca.nsw.gov.au

Updated: July 2024 26805/2007

APPLICATION FOR VOLUNTEER WORK

This form is to be completed by persons who are applying to undertake voluntary activities on behalf of or in consultation with Council.

It is designed to elicit appropriate information from the volunteer to assist Council in determining the suitability of the volunteer for the task. It also assists in identifying the training and safety equipment required in accordance with Council's risk management strategies and occupational health and safety requirements.

The Council employee (or delegate) signing the form on behalf of the Council is to ensure that any training, protective clothing/equipment and tools required are issued prior to the volunteer commencing the task. When volunteers are using their own tools and/or equipment this must be inspected and certified by the project manager (or delegate) and recorded on the volunteer tool register.

APPLICANT DETAILS (CAPITAL LETTERS PLEASE)

Surname: _____ Ms/Mrs/Miss/Mr

Given Names: _____

Address: _____ Postcode: _____

Email: _____ Mobile _____

Note: if applicant is under the age of 18 a parent or guardian must co-sign this application and the volunteer must be supervised at all times by a responsible adult.

Person To Be Contacted In Case Of Emergency: _____

Phone (home): _____ Mobile: _____

Type of volunteer work application is made for/Committee Details:

Skills held in relation to this work: _____

Referees

Name: _____ Phone: _____

Name: _____ Phone: _____

Availability

Please tick the times when you will normally be available for volunteer work with Council:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

**NAMBUCCA VALLEY COUNCIL
APPLICATION TO WORK WITH COUNCIL AS A VOLUNTEER**

Work Details

(To be completed by Council employee/delegate in charge of work area)

Location of Work: _____

Type of Work: _____

Proposed duration of work: _____

Training required: _____

Community Development Officer (volunteers only) contacted to arrange Mandatory Safety Training.

Tools and protective equipment required for work: _____

Identify which (if any) tools and equipment are to be provided by volunteer. Volunteers are not to use their own tools or protective equipment unless it has been inspected and certified by the project manager (or delegate).

APPLICANT DECLARATION

- ◆ I agree to Council conducting probity checks (where appropriate) in accordance with the protection of children legislation.
- ◆ I agree to referees being contacted in relation to this application to provide voluntary services to Council.
- ◆ I agree to work under the guidance and supervision of the Council employee responsible for the area of work for which I have applied.
- ◆ I agree to use the tools and protective equipment specified in this application.
- ◆ I agree to contact the Council employee designated if I intend to vary the nature of work specified in this application, or if I experience any problems with the work I am undertaking.
- ◆ I understand that Council may terminate my volunteering services if I do not comply with any aspect of this agreement.
- ◆ I agree to inform Council of any injuries sustained whilst undertaking volunteering activities.
- ◆ I am willing to undertake any training deemed necessary by Council in relation to my volunteering services to ensure that I comply with all policies and legislative obligations of Council.
- ◆ I understand that as a volunteer I am expected to maintain the same standards of confidentiality, courtesy and organisational discipline as Council's paid employees.
- ◆ I agree to work in a constructive and cooperative way with Council staff, and comply with any safety procedures requested.
- ◆ I understand that I am volunteering my services to Council and will not receive remuneration for my services, and that I will inform Council when I no longer wish to be considered for further volunteering activities.

Signed: _____

Date:/...../.....

Parent/Guardian signature: _____

Date:/...../.....

(if applicant is under 18 years of age)

Please forward your application to:

General Manager
Nambucca Valley Council
PO Box 177
MACKSVILLE NSW 2447
Email: council@nambucca.nsw.gov.au

Thank you for your interest in working for Council as a volunteer

**NAMBUCCA VALLEY COUNCIL
APPLICATION TO WORK WITH COUNCIL AS A VOLUNTEER**

OFFICE USE ONLY

Tools and protective equipment to be provided by Council: _____

Traffic management plan provided by Council: _____

The applicant is approved for the work specified in the form.

Signed: _____

Date:/...../.....

Manager in charge of work area

- Signed copy of form to be returned to applicant and placed on file
- Traffic Management Plan Supplied
- Form posted to applicant
- Form placed on file
- Volunteer tools and protective equipment register completed
- Mandatory Safety Training completed with Council's Community Development Officer

Signed: _____

Date:/...../.....

The personal information provided in this document is protected under the Privacy and Personal Information Protection Act, 1998. The PPIPA provides for the protection of personal information, and for the privacy of individuals.

The Nambucca Valley Council must not disclose your personal information to any person or body if it is not directly related to the purpose for which the information was collected.

If you have a complaint, or require further information about the collection and use of personal information, please contact Council's Director Corporate Services.