

CONFIDENTIAL





FORM 2

Application for appointment as an

ADULT VOLUNTARY CHURCH WORKER

who will provide pastoral ministry and participate in activities that involves direct, regular and not incidental contact with children

THOSE NEEDING TO COMPLETE FORM 2 INCLUDE BUT ARE NOT LIMITED TO THE FOLLOWING ROLES:

- Lay Pastoral Ministers (LPMs) Wardens
- Sunday School Teachers
- Sunday School Helpers and Assistants
- Creche Workers and Assistants
- Mainly Music Leaders and Facilitators (not those who provide catering)

- Camp Leaders Staff and Helpers
- Youth Leaders and Staff
- Holiday Program Leaders
- Overnight Activity Leaders
- Music Leaders and Choir Members where children are participating
- Worship Leaders

If you do not fall into this category, please complete FORM 5

Please contact screenings@perth.anglican.org if you are unsure of your Safe Ministry requirements based on your roles

Adopted by the General Synod, October 2004 | Effective from 1 May 2019

NAME OF APPLIC	·				
ROLES UNDERTAKEN IN PARISH/ORGANISATION					
	FOR OFFICE USE ONLY				
Safe Ministry Services Manager					
	Signature	Date			

THE SAFE MINISTRY CHECK

ABOUT THIS FORM

This form must be completed when a person is going to undertake pastoral ministry that involves direct, regular and not incidental contact with children. 'Ministry to children' and 'pastoral ministry' are defined in the Safe Ministry to Children Canon 2017. Pastoral ministry with children includes:

- giving spiritual advice and support, education, counselling, medical care, and assistance in times of need that involves direct, regular and not incidental contact with children;
- participating in overnight activities such as camps;

Roles involving pastoral care include Sunday School teacher, holiday program leader, youth leader, camp helper, overnight activity leader, regular creche assistant, music team leader, worship leader.

TO THE APPLICANT

Thank you for volunteering for a ministry role within your church.

The Anglican Church is committed to doing everything we can to ensure that our churches are safe for all who participate in church activities—including our volunteers. That is why we require everyone who has a ministry role within the church to meet specific standards of personal conduct.

To help us meet our commitment to safe ministry, we ask everyone who wants to be appointed as a voluntary church worker to answer some important questions. That's the purpose of this form.

Some of the questions are personal and sensitive. We are not asking you these questions because we think you've done anything wrong. We ask them because they are part of a process that will help ensure our churches are safe.

- **COMPLETING THE FORM 1** Complete all sections
 - 2 Answer the questions in Section 2 honestly. Where required, put a cross [X] or tick in the appropriate box
 - 3 If you answer 'Yes' to certain questions, please provide full details and use a separate page, identifying the question, if more space is required
 - 4 IMPORTANT NOTE: Sign your initials at the bottom of every page and sign your full signature at the end

SUBMITTING THE

Please submit your application by

FORM

EMAIL - <u>screenings@perth.anglican.org</u>

Or by MAIL in an envelope marked CONFIDENTIAL to:

Safe Ministry Services

GPO Box W2067 PERTH WA 6846

PRIVACY THIS APPLICATION IS CONFIDENTIAL.

It will be retained in a secure place in the Diocesan Office. Except as may be required by law or by church disciplinary procedures, the information you supply will be used only for screening and disciplinary purposes.

If required by law, the information you supply will be made available to the applicable authority.

SAFE MINISTRY **APPLICATION** REQUIREMENTS

- Volunteer National Police Clearance (VNPC) or National Police Clearance (certificate must be no more than three (3) years old or a VNPC Application)
- Working with Children Check
- Safe Ministry Training (Level 2)
- Form 8 Reference Check (new volunteers or applicants only)

2 THE APPLICANT							
Personal Details	Title	□ Dr	□Mr	☐ Mrs	☐ Miss	☐ Ms	☐ Other - specify:
	Full Legal Name						
	Known as (if applicable)						
	Previous Name (if applicable)						
	Date of birth (dd/mm/yyyy)						
	Gender □ Male □ Female □ Other						
	Marital Status						
	Occupation						
Residential address	Number	, Street					
	Suburb/	Town, Po	stcode				
	State, Te	erritory/C	ountry				
Postal address	Number	, Street					
(if different from residential)	Suburb/	Town, Po	stcode				
	State, Te	erritory/C	ountry				
Contact details	Phone (F	H)		(W)			(M)
Email							
3 SUITABILITY FOR	MINISTR	Υ					
Please answer the ques	tions belo	ow by put	ting a cros	s [X] or ticl	k in the app	ropriate	box
	t is mean Faithfuln	t by a wor ess in Ser	d or phras	e in bold p Diocesan	rint, please	consult t	the Key Terms in Faithfulness
a) Do you have any	health co	ndition(s)	, which ma	ay affect	□No		☐ Yes ▶
your work with children or young pe		eople?		► If yes, p	lease deta	ail below	
b) Have you ever ha			, whether	in	□No		□Yes►
Australia of Infan				► If YES ha suspende		nce ever been revoked or	
					□ No		□ Yes ►
					If NO, conti ► If yes, ple		l below

c)	Has anyone in Australia or in any other country alleged to a court, disciplinary tribunal or employer that you have committed a criminal offence?	□ No ► If yes, please detail belo	□ Yes ►
d)	Have you ever been charged* with a criminal offence in Australia or in any other country? *'Charged' means that the police or other government authority has accused you in writing of committing a criminal offence. Getting a parking or speeding fine is not a criminal offence.	□ No If yes, please detail belo	□ Yes ▶ ow
e)	Have you ever been convicted of a criminal offence in Australia or in any other country?	□ No ► If yes, please detail belo	□ Yes ▶
f)	Have you ever applied for a working with children check?	NoIf YES, has your working been refused, cancelled□ No	☐ Yes ► with children check ever revoked or suspended? ☐ Yes
g)	Have you ever had a court order issued against you as a result of someone accusing you of violence, abuse, likely harm, harassment or stalking?	□ No If yes, please detail belo	□Yes ►
h)	 Has anyone ever accused you of child abuse? A 'child' is a person under the age of 18. 'Child abuse' means: doing any one or more of the following things to a child, whether directly in person or via an electronic device such as a computer, tablet or phone: bullying; emotional abuse; harassment; neglect; physical abuse; sexual assault; spiritual abuse; grooming; or failing—without a reasonable excuse—to comply with any law that requires you to report child abuse to the police or other authority; or possessing, producing or distributing child exploitation material (e.g. viewing child pornography or sexting) 	□ No If yes, please detail belo	□Yes ►
i)	Have you ever done anything that may result in someone accusing you of child abuse?	□ No If yes, please detail belo	□ Yes ▶
j)	Has a child or dependent young person for whom you were caring as a parent or in any other capacity ever been removed from your care, or been the subject of a risk assessment by the relevant authorities?	□ No ► If yes, please detail belo	□Yes ►

k)	 Have you ever engaged in any of the following conduct, whether personally, virtually or by any electronic means? Sexual contact with a person under the age of consent; or production, sale, distribution or illegal use of child exploitation material; or conduct likely to cause harm to a child or young person, or to put them at risk of harm. 	□ No ► If yes, please	□ Yes ►	
	Have you ever provided employment, pastoral care or	□No	☐ Yes ▶	
professional services for others?		► If YES, have you ever engaged in sexual contact, whether personally, virtually, or by any electronic means, with a parishioner, client, patient, student, employee or subordinate - other than with your spouse?		
		□No	□Yes	
m)	Have you had, or do you have a history of alcohol	□No	□Yes	
	abuse or have been counselled for your alcohol consumption?	► If yes, please	e detail below	
n)	Do you use recreational drugs or have a history of	□No	□Yes	
•	substance abuse?	► If yes, please	e detail below	
	'Substance abuse' would include, but not be limited to abuse of prescription, over the counter, recreational or illegal drugs, use of mind-altering substances and petrol sniffing.			

4 RECORD OF MINISTRY

In the table below, please list all churches, parishes or congregations, and, if appropriate, church and parachurch organisations (such as Scripture Union groups, Crusaders) where you have undertaken ministry as a voluntary worker. We will ask you to authorise them to tell us what they know that's relevant to our assessment of your suitability for ministry in the church.

Church/Organisation	Location	Role	From (m/y)	To (m/y)

5 REFERENCES

Please provide details below of two (2) referees.

In this context, a 'referee' is someone over 18 years of age who is able to give a report on your good character and suitability for ministry among children and young people. A referee cannot be a relative or a close friend. If you have lived in another state or country within the last three years, please nominate at least one referee from your most recent parish or placement in that state or country.

NEW VOLUNTEERS: **Form 8 - Reference Check** to be completed by the Parish Priest, Locum Tenens or Authorised Parish Representative using the referees below and is to be included with this application.

Title	☐ Dr	☐ Rev	□ Mr	☐ Mrs	☐ Miss	☐ Ms
	☐ Other -	specify:				
Full Legal Name						
Contact Number						
Email						
Relationship to Applicant	·					
Must be	either an emp	RE ployer or an adult p	FEREE 2 person who has ki	nown you for 3 yea	ars or longer	
Title	□ Dr	□ Rev	□ Mr	☐ Mrs	☐ Miss	☐ Ms
	☐ Other -	specify:				
Full Legal Name						
Contact Number						
Email						
Relationship to Applicant						
lease attach a copy of you	ur Working		Check (WWC)	or alternativel	y have one for	m of ID
lease attach a copy of you ghted by an Authorised P Current Australian Driver	ur Working Parish Repro	esentative • Current Pa	ssport			
ease attach a copy of you ghted by an Authorised P Current Australian Driven Birth certificate	ur Working Parish Repro	esentative • Current Pa	ssport		ly have one for tralian immigra	
lease attach a copy of you ghted by an Authorised P Current Australian Driver Birth certificate I ID Sighted ID Type:	ur Working Parish Repro	• Current Pa: • Australian	ssport citizenship doo			
lease attach a copy of you ighted by an Authorised P Current Australian Driven Birth certificate	ur Working Parish Repro r's License	esentativeCurrent ParameterAustralianfrming identity:	ssport citizenship doo	cument or Aust	tralian immigra	

7 STATEMENTS AUTHORITY FOR

AUTHORITY FOR INFORMATION I hereby authorise:

the Anglican Church and its delegates to contact and exchange information with the church organisations, churches, parishes or congregations in the section Record of Ministry;

every one of these bodies to provide to the Anglican Church and its delegates any information they may have that is relevant to assessing whether I am a suitable person to undertake ministry in the Church; and

my referees to provide to the Anglican Church and its delegates any information relevant to my application for appointment as a voluntary church worker.

RELEASE FROM LIABILITY

I hereby release from liability any person or organisation that provides information relevant to the assessment of my suitability to undertake ministry in the Church.

I also agree to release the Anglican Church and its delegates from any and all liability as it relates to any investigation by them regarding the information contained in this application, or any action by them as a result of such investigation.

NOTE

I understand that any intentional error or omission in the information in this application may prevent me from undertaking voluntary ministry with children in the Church.

DECLARATION BY APPLICANT	l,
	(insert your full name)
	of

(insert your full address)

do solemnly and sincerely declare that the information I have provided in this application and the information contained in any documents accompanying this application are true and correct to the best of my knowledge and belief.

SIGNATURE OF APPLICANT	
DATE	