

CONFIDENTIAL

Anglican Diocese of Perth

**Anglican
Church**
Diocese of Perth



FORM 6

Application for appointment as a

PARISH VOLUNTEER BETWEEN THE AGES OF 13 AND 17 YEARS

who are not in child-related ministry or activities

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

NAME OF APPLICANT

NAME OF PARISH

ROLES UNDERTAKEN IN PARISH

1 THE SAFE MINISTRY CHECK

TO THE APPLICANT Thank you for volunteering for a ministry role within your church or church organisation. The Anglican Church is committed to doing everything we can to ensure that our churches and church organisations 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 questions are personal and sensitive. We are not asking you these questions because we think you have done anything wrong. We ask them because they are a part of a process that will help to ensure our churches are safe.

COMPLETING THE FORM

- 1 Complete all sections.
- 2 Answer the questions in Section 3 honestly. Where required, put a cross [X] in the appropriate box.
- 3 If you answer 'Yes' to certain questions, we may have to ask you for more information. But that doesn't necessarily mean that you can't be a volunteer.

SUBMITTING THE FORM Please submit your application by
EMAIL - screenings@perth.anglican.org
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.

2 THE APPLICANT

Personal Details

Title ☐ 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

Residential address

Number, Street

Suburb/Town, Postcode

State, Territory/Country

Contact details

Phone (H) (M)

Email

3 SUITABILITY FOR MINISTRY

Does the applicant have any issues relating to their health which may impact on their volunteering? ☐ No ☐ Yes

Is there anything about the applicant's past conduct or behaviour which would call into question their suitability to volunteer with other children and vulnerable people? ☐ No ☐ Yes

Has the applicant ever been cautioned or disciplined for any inappropriate or problematic behaviour? ☐ No ☐ Yes

I understand that if I answer YES to any of the questions above, I will make a full disclosure to the Safe Ministry Services Manager on behalf of my child.

4 DECLARATION

DECLARATION BY APPLICANT To the best of my knowledge, the information in this application form is correct

SIGNATURE OF APPLICANT _____

DATE _____

If you are under 16 years of age, either a parent or guardian must sign below

I declare that the information given in this document is correct and that I do not know of any reason which should prevent my child or the young person in my care from being a volunteer in the Diocese of Perth. I agree that any decision made in relation to this application is final and I will abide by that decision.

**SIGNATURE OF
PARENT/GUARDIAN** _____

DATE _____

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