**South East Community Link**

**Every Person Counts Every System Fair**

**Volunteer Application Form**  - Please complete all the questions and return to mguillemain@secl.org.au

Thankyou.

**Your Personal Details**

First Name: Last Name:

Telephone home: Mobile:

Street Address:

Post Code: Email address:

Date of birth: Country of birth:

Languages spoken:

Days available to volunteer

Emergency contact details

First Name: Last Name:

Contact Number:

How did you find out about the volunteer program at South East Community Links?

What is your understanding of the duties you will perform in your volunteer role?

Are you available to volunteer one day a week for 2 hours for a period of 6-12months?

 Can you describe your previous relevant volunteering or working experience that can help you in this role?

 What do you hope to gain from your experience at SECL? / What are your learning goals?

  What skills can you bring to SECL? (another language, IT skills, people skills etc.)

A Police Check and a Working with Children Check are both requirements of SECL. Are you comfortable for that to occur?

Office use only

Resume Interview Training Date: