



Balwyn Evergreen Centre

A.C.N. 004 672 306 A.B.N. 94 907 516 455
 45 Talbot Ave, Balwyn, 3103 Ph: 9836 9681 Fax: 9836 8259
 Email: volunteer@balwynevergreen.org.au

GENERAL VOLUNTEER APPLICATION FORM

PERSONAL INFORMATION					
Name				Preferred Name	
Address				Post Code	
Phone Contact		Mobile:	Home:	Work:	
Email Address					
Are you currently taking medication which we should be aware of? <input type="checkbox"/> YES <input type="checkbox"/> NO					
If yes, please specify:					
Do you have any medical conditions which could restrict you in any tasks we may require you to do? <input type="checkbox"/> YES <input type="checkbox"/> NO					
If yes, please specify:					

EMERGENCY CONTACT					
Name					
Relationship					
Address				Post Code	
Phone Contact		Mobile:	Home:	Work:	
Email Address					

WHAT VOLUNTEER AREA(S) ARE YOU INTERESTED IN:		
<input type="checkbox"/> Transport Driver	<input type="checkbox"/> Transport Driver Assistant	<input type="checkbox"/> Aged Care Volunteer Visitor Scheme
<input type="checkbox"/> Kitchen / Dining Room Assistant	<input type="checkbox"/> Admin / Office Assistant	<input type="checkbox"/> Activity Group Assistant
<input type="checkbox"/> Dog Walking	<input type="checkbox"/> Other: Please Specify.	
See current vacancies and volunteer role descriptions on our website at https://www.balwynevergreen.org.au/		

AVAILABILITY: Please advise us of your availability for volunteer assignments?			
DAY	TIME (AM)	TIME (PM)	Comments
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			



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SUMMARY OF YOUR SKILLS / QUALIFICATIONS

Summarize relevant skills and qualifications you have acquired from employment, volunteer work, or through other activities, including hobbies or sports

LANGUAGES

Do you speak languages other than English that you might like to use in your volunteer role? If yes, please list:

CONSENT:

As a condition of volunteering, we are required to:

- 1. Carry out a National Police Check (paid for by us).**
Do you give permission for this? YES NO
- 2. Sight evidence of your up-to-date COVID-19 and Flu vaccinations (or exemption certificate)?**
Do you give permission for this? YES NO

For TRANSPORT Volunteers Only

Provide a copy of my current Victorian Driver's License and participate in a test drive.

(Note: Volunteers driving Balwyn Evergreen's minivan or car are fully covered by insurance in the event of an accident, but any traffic infringements will be your responsibility)

REFEREES: Please provide two people who are NOT family members who can tell us about you.

Name:	Name:
Phone No:	Phone No:
Email:	Email:
Relationship:	Relationship:

Please email form back to volunteers@balwynevergreen.org.au For queries, please call 03 9836 9681

One of our staff will contact you shortly to arrange a catch-up to discuss your application.