

# VOLUNTEER APPLICATION

Last Name  Given Name

Address

Contact Phone

Email

Volunteer Roles  Events  Exhibitions  Research / Administration  Visitor Experience

Preferred Days  Mon  Tue  Wed  Thu  Fri  Sat

Preferred Shift  Morning  Afternoon

Do you have a current Working with Children Blue Card? If yes, provide details below  Yes  No

Card Number  Expiry Date

Please tell us about yourself, i.e. special interests, hobbies, etc.

What interests you about volunteering at the Gallery and Museum?

Please tell us about any relevant experience (work or personal) you could bring to the role?

As a GRAGM Volunteer, you may be required to undertake physical tasks including lifting, climbing ladders, handling artwork, setting up equipment, carrying items, etc. Would you be willing and able to perform such tasks?

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Do you feel comfortable working with people of all ages, and/or working with the public?

By signing below, you acknowledge that all information provided on this form is true and correct, and that you understand there will be a six (6) month probation period to ensure both parties would like to continue the relationship:

Signature  Date

Parent/Guardian Approval (if volunteer is under the age of 18 at time of application)

I, parent/guardian of the applicant declare that the above information is correct in all respects at the time of lodgement, and I give my permission for the applicant to be engaged in Council's volunteer program.

Parent/Guardian Name and Signature  Date

Privacy Statement: Gladstone Regional Council is collecting your personal information to process your application form. This information will only be accessed by authorised Council employees and may be given to the Queensland Police Service. This information will not be given to any person or agency unless you have given us permission, or we are required by law.