



C1, 1-13 The Gateway,
Broadmeadows VIC 3047
T (03) 9359 2861
F (03) 9359 2899
E mail@vass.org.au
W www.vass.org.au

ABN 19 633 403 991 INCORPORATION NO. A0009173D

Application for Volunteers

Today's Date:

Personal Information

Name:

Address:

City:

State:

Postcode:

Home Phone:

Work Phone:

Mobile Phone:

Email:

Why are you interested in volunteering? Personal interest Student placement
 Community Service Hours Court ordered Other

Age ____over 18 ____under 18

Have you ever worked for VASS?

Have you ever received services from VASS?

Do you have a valid driver's license?

Do you have a car available for use while volunteering?

Insurance policy details:

Experience and Education

What is your educational/training background?

What is your employment history?

Have you had any previous experience as a volunteer? If so, with what organizations, and what kind of work did you do?

Your Interests at VASS

How did you learn about VASS? Friend/ relative Website
 College/University VASS Employee
 Current Volunteer Other *Please specify*

How long can you commit to volunteering? One time Occasionally 3-6 months
 6 months or more Other

What days are you available? Mondays Tuesdays Wednesdays Thursdays
 Fridays
 Saturdays Sundays

What times are you available? Mornings Afternoons Evenings

Do you prefer to work (check all that apply)

Directly with people served Behind the scenes Computers No preference

Hobbies/interests:

Skills you would like to use while volunteering:

Other languages you speak

1) _____ Basic Conversational Fluent
2) _____ Basic Conversational Fluent

Do you have any special needs or restrictions we should be aware of?

Date you can begin service:

Criminal History

All volunteer positions require a Police check. Have you ever been convicted of a felony? Yes No

If yes, explain.

Please describe in 3-5 sentences why you want to be a volunteer at VASS: Why, at this particular time in your life have you chosen to volunteer with us? What do you hope to gain from being a volunteer?

VASS considers applicants for internships/volunteering without regard to sex, race, age, religion, national origin, veteran or marital status, or any other legally protected status. We provide reasonable accommodation to qualified individuals with disabilities when it would not be an undue hardship. If you need a reasonable accommodation in the pre-placement process, please contact the Manager.

AUTHORIZATION AND AGREEMENT BY APPLICANT

1. I certify that the facts set for in this volunteer application are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in my application or placement interview may result in the rejection of my application or discharge from the volunteer program.
2. I consent to having VASS complete a Police check prior to volunteering.

Signature of Applicant

Date

Parent/Guardian Signature (required if less than 18 years of age)

Date



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Volunteer Reference Check

_____ is applying for a Volunteer/Intern position with the Victorian Arabic Social Services (VASS) and has listed you as a reference. Please assist us by returning this completed form to the Manager.

Reference:

Name: _____

Title: _____

Affiliation: _____

Please describe your relationship with the applicant and the number of years/months you have been acquainted:

What are some of the applicant's greatest strengths?

What are some of the applicant's greatest challenges?

Would you recommend this person to volunteer with VASS? Yes _____ No _____

Please explain:

Please provide a phone number where we can best reach you:

Signature _____

Date _____