

# Volunteer Application Form

## Instructions

- > Please answer all questions using BLOCK letters.
- > Your local team leader will contact you for an interview.
- > To submit this form click on the Submit button on page 5, email to [saasvolunteer@sa.gov.au](mailto:saasvolunteer@sa.gov.au) or print and sign and post to VSU, GPO Box 3, Adelaide SA 5001

I wish to volunteer at ..... (town name) ambulance station.

## Personal

Title:  Mr  Mrs  Ms  Miss Surname: ..... Date of birth: .....

Given names: ..... Preferred name: .....

Residential address: .....

Town/Suburb: ..... State: ..... Postcode: .....

Postal address (if different from above): .....

Town/Suburb: ..... State: ..... Postcode: .....

Home telephone: ( ) ..... Mobile: ..... Work telephone: ( ) .....

Email address: .....

## Emergency contact

Relationship to applicant: .....

Title:  Mr  Mrs  Ms  Miss Surname: .....

Given names: .....

Address: .....

Town/Suburb: ..... State: ..... Postcode: .....

Home telephone: ( ) ..... Mobile: ..... Work telephone: ( ) .....

## Other information required Please respond to all

	Yes	No
Do you have a current driver's licence? If yes, please bring your licence to your interview.	<input type="checkbox"/>	<input type="checkbox"/>
Are you an Australian resident? If not, please bring a copy of your passport and visa to your interview.	<input type="checkbox"/>	<input type="checkbox"/>
Are you aware you will need to complete a criminal history check and National Police Check as part of your application?	<input type="checkbox"/>	<input type="checkbox"/>
If you already hold a valid DCSI child related employment screening, please bring it to your interview.		
Are you aware you will require a medical assessment (at no cost to you)?	<input type="checkbox"/>	<input type="checkbox"/>

### Office use only

Panel chair name: .....

Operational  Non-operational  Not recommended

## Background information Please respond to all

Have you ever been investigated, arrested or reported for, or pleaded or found guilty of, any criminal offence?

Yes

No

If 'yes', please provide further information. Attach additional pages if required.

Have you ever been charged with a serious traffic offence which resulted in the loss or suspension of your driver's licence?

Yes

No

If 'yes', please provide further information. Attach additional pages if required.

Are you currently facing charges yet to be determined for any offence? If 'yes', please provide further information.

Yes

No

Attach additional pages if required.

Have you ever had your employment and/or volunteering role terminated by a South Australian public sector agency or any other organisation for any reason? Attach additional pages if required.

Yes

No

Have you been the subject of formal allegations or an investigation or any other process relating to alleged unsatisfactory performance or misconduct as an employee or volunteer? If 'yes', please provide further information. Attach additional pages if required.

Yes

No

## Background information (continued)

Have you ever been the subject of allegations of conduct by you of a violent and/or sexual nature towards or in relation to a child or children (person under 18 years of age)? Yes  No

Have you ever been the subject of allegations of conduct by you of a violent and/or sexual nature towards or in relation to an adult person (over 18 years of age)? Yes  No

**Note: Spent convictions** A spent conviction is a criminal conviction that lapses either immediately or after a period of time pursuant to the provisions of the Spent Convictions Act 2009. You are not required to provide detail in respect of certain types of spent convictions except where you are applying for certain types of roles.

You are required to provide detail about certain types of spent convictions where you are applying for a role involving interaction with children or certain vulnerable classes of people.

If you are in any doubt as to whether a conviction of you is spent and liable to be disclosed by you, you should seek independent advice at your own expense.

## Education and qualifications

Highest level of education completed: ..... Year completed: .....

Trade qualifications (show dates gained): .....

Other relevant training and/or certificates: .....

Other relevant medical experience: .....

## Employment status

Are you currently:    Employed     Full-time     Part-time     Unemployed  
                                 Self-employed     Full-time     Part-time     Retired  
                                 Student     Full-time     Part-time     Caring for home/family  
                                  Other .....

If you are a current (or previous) SA Health employee please provide your HAD ID (username only): .....

Most recent employment:

Company/organisation: ..... Date started: .....

Position: ..... Date ended: .....

Company/organisation: ..... Date started: .....

Position: ..... Date ended: .....

## What made you decide to volunteer?

1. Why do you want to become a volunteer for SA Ambulance Service? Attach additional pages if required.

2. What do you hope to gain from becoming a SAAS volunteer? Attach additional pages if required.

## Hobbies and interests

What are your hobbies and interests?

## Volunteer involvement (past and current)

Provide details of any other volunteer involvement:

Organisation: ..... Location: .....

Contact person: ..... Phone no: .....

Years of service: ..... Current?  Yes  No

Organisation: ..... Location: .....

Contact person: ..... Phone no: .....

Years of service: ..... Current?  Yes  No

## Name and contact details of two referees

**Work referee**

Title:  Mr  Mrs  Ms  Miss Surname: ..... Given names: .....

Organisation: ..... Dates worked: .....

Telephone: (     ) ..... Dates worked: .....

**Work/Personal referee** (if you have no relevant work experience, please supply either community or personal reference)

Title:  Mr  Mrs  Ms  Miss Surname: ..... Given names: .....

Telephone: (     ) ..... Dates worked: .....

**How did you hear about SA Ambulance Service needing more volunteers? (Please tick all that apply.)**

SAAS website       Poster       A-frame signboard       Local show/field day

Flyer/handout       TV       Word-of-mouth       Social media

Local display or event       Radio       Newspaper or newsletter

Other .....

## Declarations Please tick all boxes before submitting

- I have personally completed this application form. To the best of my knowledge, the answers are true and correct in every way.
- I understand that any erroneous or false declaration made by me in this application may result in disciplinary action or termination of my services as a volunteer.
- If my application to become a volunteer with SA Ambulance Service is successful, I agree to be bound by, and will at all times adhere to, current SA Ambulance Service and SA Health codes of conduct and/or ethics. I will also observe, respect and abide by all current terms and conditions, policies and procedures relating to SA Ambulance Service, and any subsequent amendments. Failure to do so may result in disciplinary action or termination of my services as a volunteer.
- I will maintain strict confidentiality with all SA Ambulance Service information and all patient information and understand that a breach of this information will result in disciplinary action or termination of my services as a volunteer.
- I understand that my application is subject to a satisfactory medical report provided by my own medical practitioner, a criminal history check and National Police Check and current SA driver's licence.
- I give approval for my referees and any organisations I have listed to be contacted for the purpose of verifying past work/volunteer history.
- PRIVACY DECLARATION:** SA Ambulance Service recognises the importance of protecting the privacy of individuals' personal information. I have read and understood the 'SA Ambulance Service Privacy Disclosure Statement for Applicants' (below) and agree to the use of my personal information in the manner described in the statement. I understand that if I am successful in my application, my contact details (address, phone number, etc.) may be made available to SA Ambulance Service paid and volunteer management personnel where required for the effective operation of SA Ambulance Service.

## Signature

I declare that I have read and understood the declarations and privacy disclosure statement.

Applicant's signature: ..... Date: .....

Once you have completed the application form and typed your name in the space above, email this form using the button on the right or email to [saasvolunteer@sa.gov.au](mailto:saasvolunteer@sa.gov.au). If you are printing and posting this form, please sign above and post to VSU, GPO Box 3, Adelaide SA 5001

**Submit application**

## Privacy disclosure statement

### SA AMBULANCE SERVICE PRIVACY DISCLOSURE STATEMENT FOR APPLICANTS

SA Ambulance Service (SAAS) recognises the importance of protecting the privacy of individuals' personal information.

When applying for a volunteer position at SAAS, you will be required to provide certain information about yourself.

#### Collection of your information

SAAS collects your personal information in order to assess your volunteer application.

SAAS may also make notes and prepare confidential reports in respect of your application.

SAAS generally collects the information it requires directly from you by way of written materials (e.g. your application), interviews or telephone discussions.

If you do not provide SAAS with the information it requires, it may not be able to process your application (and therefore may reject it).

In limited circumstances, SAAS may also collect information about you from third parties. SAAS will conduct criminal record checks and may collect and store information about you from law enforcement bodies, government agencies or any referees which you have nominated in your application.

#### Use and disclosure of your information

SAAS will store your personal information for as long as SAAS believes it may be required.

SAAS will only disclose the information contained in applications to third parties which assist us in our recruitment functions.

SAAS will not disclose your personal information to any other third party, except with your consent or in accordance with the Commonwealth *Privacy Act 1988*.

Before providing SAAS with the name and contact details of any other individual (such as your referee) in connection with your application, you must first obtain their consent for their personal information to be included on your application.

You should also inform the person that:

- > their personal details will be disclosed to SAAS in connection with your application
- > they may request access to the information held about them by SAAS by contacting us at the address set out below.

#### Access and correction

You may seek access to personal information held about you by SAAS.

SAAS will correct or amend any information which it considers inaccurate, incomplete or out-of-date.

Access to information must be made in accordance with the *Freedom of Information Act 1991 (SA)* in the prescribed manner and forwarded to:

#### Freedom of Information Officer

SA Ambulance Service  
GPO Box 3  
ADELAIDE SA 5001

Telephone: 1300 13 62 72

Full details of SAAS's privacy procedures are set out in its *Privacy Policy*, copies of which may be obtained by contacting SAAS as above.