



Canterbury City Community Centre  
P.O Box 66  
Lakemba NSW 2195  
Ph: 9750 9344  
Fax: 9740 6332

## **Volunteer Registration**

Date\_\_\_\_\_

Family Name \_\_\_\_\_ Other Names \_\_\_\_\_

Name you prefer to be called (if different) \_\_\_\_\_

Gender Identity \_\_\_\_\_ Nationality \_\_\_\_\_

Address \_\_\_\_\_ Suburb \_\_\_\_\_ P/Code \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ Mob \_\_\_\_\_

Birth Date \_\_\_\_\_ Email Address \_\_\_\_\_

Drivers Licence ☐ Yes ☐ No Specify Class: 1C LR Do you have your own car? Yes or No

Permanent Resident ☐ Yes ☐ No if no, what type of visa are you on? \_\_\_\_\_

### **Where did you hear about STARS?**

- |   |  |
|---|--|
| <input type="checkbox"/> Local paper                      | <input type="checkbox"/> Community group |
| <input type="checkbox"/> Centrelink/ Job Provider         | <input type="checkbox"/> Library poster  |
| <input type="checkbox"/> Community Information Desk/Stall | <input type="checkbox"/> Pamphlet        |
| <input type="checkbox"/> Word of mouth / Friends          | <input type="checkbox"/> Internet        |
| <input type="checkbox"/> Community Information Directory  | <input type="checkbox"/> Other           |

☐ Have you been referred by an Agency/Job Provider? Please specify \_\_\_\_\_

### **Are you currently?**

- |  |   |
|--|---|
| <input type="checkbox"/> Employed Full-time          | <input type="checkbox"/> Home duties            |
| <input type="checkbox"/> Employed Part-time / Casual | <input type="checkbox"/> Disability allowance   |
| <input type="checkbox"/> Looking for work            | <input type="checkbox"/> Working as a volunteer |
| <input type="checkbox"/> Retired                     | <input type="checkbox"/> Student                |

### **Why do you want to do volunteer work?**

\_\_\_\_\_

**Have you done volunteer work before?** ☐ Yes ☐ No Please give details\_\_\_\_\_

**What skills and experience do you have?**

- ☐ Working with older people
- ☐ Administration / Computer skills
- ☐ Reception Duties
- ☐ Driving
- ☐ Home visiting
- ☐ Book keeping
- ☐ Recreational Activities

- ☐ Counselling
- ☐ Gardening / Maintenance
- ☐ Hospitality
- ☐ Art / Craft
- ☐ Bilingual Skills / Interpreter
- ☐ Working with children

Other \_\_\_\_\_

**Do you speak another language?** Yes ☐ No ☐ Please specify \_\_\_\_\_

**What area of volunteer work are you interested in?**

- ☐ Administration /Computer
- ☐ Working with older people
- ☐ Recreational activities
- ☐ Home visiting
- ☐ Companion / Mentor
- ☐ Gardening
- ☐ Working with people with a disability
- ☐ Arts/Crafts
- ☐ Working with Youth

- ☐ Meals on Wheels
- ☐ Taking people to appointments
- ☐ Shopping assistance
- ☐ Management Committee
- ☐ English teaching/Home Tutor
- ☐ Working with children
- ☐ Bi-Lingual skills
- ☐ Driver
- ☐ Other: specify \_\_\_\_\_

**When are you available?**

- ☐ Weekday morning   ☐ Weekday afternoon   ☐ Evening   ☐ Weekend

Which days? \_\_\_\_\_

**Are there any factors that we need to take into consideration when referring you to a volunteer position?** Health ☐ Cultural ☐ Other ☐

**Do you give us permission to share this information with agencies to which you may be referred?**  
Yes ☐ No ☐

**Would you like to go on the STARS email list to receive information about training courses and volunteer positions?** Yes ☐ No ☐

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

(You have the right to withdraw consent at any time)