

Volunteer Registration Form

** NOT for use by volunteers who are current Griffith University students or staff members*

1. VOLUNTEER DETAILS		"You" or "the volunteer"	
Family name:		Given names:	
Title (optional):		Date of birth:	
Home address:			
		State:	Postcode:
Mailing address:			
		State:	Postcode:
Mobile:		Email address:	
2. NEXT OF KIN DETAILS			
Name:		Contact number:	
Relationship to Volunteer:			
3. UNIVERSITY SUPERVISOR DETAILS			
Host Element:		Campus:	
Supervisor's Name:		Supervisor's Staff No: s	
Position Title:		Extn:	
4. VOLUNTEER WORK TO BE UNDERTAKEN			
Period of volunteer work:		<i>* Maximum period of 6 months per engagement</i>	
Start Date:		Expected End Date:	
Details of work to be undertaken on a voluntary basis:			
Will this work require contact with children and young people? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES , depending on the nature of contact, the volunteer may require a positive "Working with Children Check" (Blue Card), and must have an awareness and commitment to the well-being of children. If the volunteer has applied for or already holds a current Blue Card, they are to sign the Consent to Discuss Information Form to allow Blue Card Services to provide the following information to the nominated authorised person at Griffith University: a) the current status of their Blue Card application; b) the validity of their Blue Card; and c) any changes to the status of their Blue Card application.			
5. UNIVERSITY AND VOLUNTEER RELATIONSHIP			
The University appreciates the contribution to its work made by people who act as volunteers. However, it is important that You fully understand the terms of this arrangement. By signing this form, You agree to the terms set out below:			
5.1 You understand that this opportunity is unpaid and that You are under no obligation to attend the campus.			
5.2 Despite the start and end dates set out above, either party may end the volunteering arrangement at any time. As a courtesy, reasonable notice of termination should be given if possible.			
5.3 Depending on the nature of the volunteer work, You may be required to undertake an appropriate workplace induction process, and may be required to sign a confidentiality agreement. While volunteering, You must:			
(a) comply with all rules, directions, policies and procedures (including those relating to security or workplace health and safety) that are in effect at the University or are communicated to You by the University Supervisor from time to time;			
(b) act responsibly in the use, maintenance and custody of all University resources; and			
(c) comply with all relevant privacy laws in dealing with any personal information obtained while volunteering and must not disclose personal information without the prior written consent of the University.			
5.4 Provided this form has been fully signed, You will be covered by the University's Volunteers Personal Accident Policy and Public Liability Policy, while undertaking Your volunteer role during the period of voluntary work.			
6. APPROVALS – both must sign			
Signature of Volunteer:		Date:	
Signature of Supervisor:		Date:	
PRIVACY STATEMENT: The personal information collected by this form is used for the maintenance of personnel & other University records and will be handled in accordance with the University's Privacy Plan . RECORD KEEPING: The Supervisor is responsible for lodging a copy of this fully signed form in ConvergePoint.			