

DONCASTER SECONDARY COLLEGE VOLUNTEER FORM

We value the work and assistance that volunteers in the College provide. In case of emergency, it is important that we have accurate records for volunteers. Please complete the following documents and return to your supervisor.

All documentation will be kept confidential.

Please also provide copies of your current Working With Children's check.

All volunteers must have an OH&S. induction and be advised of emergency procedures in the College before commencing.

Personal Details

| Full Name: If your current name is different to that on any other documentation provided, please include evidence of reason for name change. | | | | | |
|---|--------------------|----------------------------|---|--|--|
| Address: Number / Street | | | | | |
| Suburb / Post Code | | | | | |
| Telephone (Home): | | Telephone (Mobile): | | | |
| Date Of Birth: | | Country of Birth: | | | |
| e-Mail Address: | | Gender: | | | |
| Emergency Contact Name: | | Em. Contact Phone: | | | |
| Start Date: | | End Date: | | | |
| Medicare Number: | | Ambulance Fund Subscriber: | | | |
| Medical Condition/s: This information will only be provided to Health Centre Staff. | | | | | |
| Faculty/Area | * THIS SECTION MUS | ST BE COMPLETED * | | | |
| Area: | | | | | |
| Staff Supervisor: | | | | | |
| Days/times: | | | | | |
| I, certify that the information I have provided to the school is accurate: | | | | | |
| Applicant's Signature: | | Date | : | | |
| WORKING WITH CHILDREN CHECK (WWC) WWC Card copy provided WWC Expiry Date / / | | | | | |
| PLEASE NOTE: VOLUNTEER <u>MUST</u> UPDATE INFORMATION ON THE WWC WEBSITE TO SHOW THEY WILL BE VOLUNTEERING AT DONCASTER SECONDARY COLLEGE | | | | | |

Office Use Only

SUPERVISORS PLEASE NOTE:

All applicant details and role descriptions must be forwarded to Mandy Rohrlach to present to School Council for approval. As volunteers are not members of staff, they should be under supervision while in the College.



Pre-Service Teacher / Placement Student / Volunteer Health Statement

The primary purpose of this Health Statement is to assist us to ensure that no person is placed in an environment or given tasks that will result in physical or mental harm. It is not the intention of the Health Statement to deny a person employment solely because of disability or illness. This Health Statement does enable, where applicable, appropriate and reasonable action to be taken by DET to meet the provisions of Sections 82(7) and (8) of the Accident Compensation Act 1985 and Section 21 of the Occupational Health and Safety Act 1985.

| Nam | e: | | | | | | |
|-------------------------------------|--|---|--|----------|--|--|--|
| Emergency Contact and Telephone No: | | Name: | No.: | | | | |
| 04 | A | | | | | | |
| Q1. | ability to perform the duties of the | circumstances regarding your health or capacity to work that would interfere with your uties of the position? | | | | | |
| | In answering this question Yes or No you are also covering factors such as: existing or exposure to infectious diseases, taking of medication/treatment on a regular basis (daily, weekly, monthly). | | | | | | |
| NO[|] YES[] If yes, please | provide details. | | | | | |
| | | | | _ | | | |
| | | | | _ | | | |
| | | | | | | | |
| Q2. | Do you have an existing injury o | • | | | | | |
| | | | eing received. Pre-existing is where an injury or d. If yes please provide details of the injury or | | | | |
| NO[|] YES[] If yes, please | provide details. | | | | | |
| | | | | _ | | | |
| | | | | _ | | | |
| | | | | | | | |
| Q3. | | | any conditions which may have been hazardous tals, stressful or noisy environments) and for which ye | to ou | | | |
| NO[|] YES[] If yes, please | provide details. | | | | | |
| | | | | _ | | | |
| | | | | _ | | | |
| Signa | ture: | | Date: | | | | |

Privacy Notice:

The collection and processing of this information is in accordance with the Occupational Health and Safety Act 2004, and the Accident Compensation Act 1985.



GUIDELINES AND ADVICE FOR VOLUNTEERS AND PARENTS FORM

Parents and volunteers attending tours, camps and excursions or assisting at the College are an invaluable asset and the assistance provided is greatly appreciated by the College community.

There are a number of legal obligations associated with this role. Parents/volunteers are included in the staff – student supervision ratio and therefore have a 'duty of care' role to support the supervision of students. Parents/volunteers will have specific supervision responsibilities which need to be undertaken in line within: DET policy, 'duty of care' obligations, College Staff Code of Conduct, privacy requirements, Doncaster Secondary College policy and Child Safety Standards. Please refer to the Induction for Volunteers, Preservice and Casual Relief Staff

GUIDELINES

- Department of Education and Training [DET] employees have ultimate authority over all students on any school organised event at all times.
- Participate and supervise as directed, by the DET employee, during the entire duration of the event/tour/camp including student free time activities.
- All supervising adults have a legal duty to take reasonable steps to protect students in their charge from risks of injury that are reasonably foreseeable
- It is not the responsibility of parents/volunteers to contact the parents of individual students regarding their welfare and participation whilst on an event. A teacher is responsible for this if/when required.
- Any social, health or discipline issues need to be immediately referred to a teacher.
- Direct any concerns regarding students and the program/activities or facilities promptly to the teacher in charge.
- Adhere to emergency management procedures as outlined in the camp/excursion booklet/information and Risk Management Plan.
- Read and understand the instructions of each activity and the risk assessment material as required. Undertake the activities and supervision requirements with due care.
- Ensure information regarding all students, staff and parents is kept confidential before, during and after the event. This includes the mobile phone numbers of supervising adults.
- In general avoid the use of mobile phone during supervision except when communicating with other staff or supervisors.
- Taking photos is the responsibility of DET staff (for privacy reasons).
- If for some reason a parent/volunteer is unable to be on duty, the supervising teacher must be informed.
- As a number of children have allergies and /or special dietary needs therefore parents/volunteers are not permitted to provide any additional food during the event to any child.

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Please return along with the other forms as soon as possible

| I have read and understood the guidelines and advice and agree to abide by these: |
|---|
| Volunteer/Parent Name: |
| Tel: |
| Volunteer/Parent Signature: |
| Date: |