

Application for Safe Church Leadership

This application form shall be completed by all applicants for any volunteer leadership position to be appointed by or on behalf of MPBC.

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Name of Applicant				
Address			Postcode	
Telephone		(m)	(h)	
Email			l	
Date of Birth			Gender	M / F
Occupation				
Marital Status				
How long have you att	ended MPBC?			
Are you a member of MPBC?				
Volunteer position to be undertaken				
List details of any specific gifts, calling, training and/or experience preparing you for this role				
Do you hold a valid WA Working with Children Check? (If yes please attach a copy)				
Do you hold a valid National Police Certificate or a Volunteer National Police Certificate? (If yes, please give number, issue date and result)				
Do you hold a current First Aid qualification? (if yes, please give details and expiry date)				
Please provide details	of 1 Church Mini	stry referee:		
Name				
Contact Number				
Position				
Church/Organisation				
Role fulfilled by you				
Dates				

Please tick 'yes' or 'no' for each question below. Note: If the answer to any of the following is 'yes', please give details on a separate page. A 'yes' answer will not automatically rule an applicant out of selection.	Yes	No
Do you have any health problems which may affect your volunteering at MPBC?		
Have you ever been charged with or convicted of a criminal offence?		
Have you ever had permission to undertake paid or voluntary work with children or other vulnerable people refused, suspended or withdrawn?		
Have you ever engaged in any of the following conduct, even though never having been charged?		
Sexual contact with someone under your care		
 Sexual contact with a person under the age of consent Illegal use, production, sale or distribution of pornographic materials Conduct likely to cause harm to people, or to put them at risk of harm 		
Have you ever had an apprehended violence order, order for protection or the like issued against you as a result of allegations of violence, abuse, likely harm, harassment, stalking etc?		
Has a child or dependent young person in your care ever been removed from your care, or been the subject of a risk assessment by the authorities?		
Have you done anything in the past or present that may result in allegations being made against you of any form of child abuse, bullying or any form of harassment of adults?		
To your knowledge, have you ever been the subject of an allegation of sexual abuse or sexual misconduct?		
Do you have a history of alcohol or substance abuse, or have you experienced difficulties with addiction? (including prescription, over-the-counter, recreational or illegal drugs, pornography)		
Is there any other relevant information or matter you think we should know about?		

Declaration				
I am committing to volunteer with MPBC in this ministry and to submit to the authority and decisions of the Ministry Leader				
I agree to undertake a				
I declare that the information supplied in this form is true and correct to the best of my knowledge				
I have read and agree to abide by the MPBC Statement of Faith				
I have read and agree procedures for the are				
I understand that my nominated referee will be contacted by MPBC				
Volunteer signature		Date		
Ministry Leader signature		Date		

Privacy Statement: the personal information you have provided will help MPBC process you as a valued volunteer and will be treated as confidential.