## **CESA Volunteer Declaration**



To be considered for a volunteer role in any capacity in CESA, you must complete all parts of this Declaration, including by providing additional, supporting information and documentation where a "Yes" response has been recorded. You will not be considered unless you complete the Declaration and provide comprehensive and complete information as necessary.

If you have any questions about the Declaration, please contact your school or CEO (Human Resources Team on 8301 6853).

SURNAME:		Dr / Mr / Mrs / Ms / Other					
GIVEN NAMES:							
FORMER NAMES:		(please ensure your FULL name is included)					
DATE OF BIRTH:		(optional)					
ADDRESS:			P/	Code:			
EMAIL:							
TELEPHONE:		HOME: MOBILE:					
You m	านst provide evidend	ce of a valid, current DHS issued Working With Children Check (WWCC) for sigh	iting a	t your	locatio	n.	
VOLU	NTARY POSITION	FOR WHICH THIS APPLICATION IS MADE:					
Pleas	se respond to the	e questions below and sign the Declaration at the end of this form:					
1.		investigated, charged, arrested, reported for or pleaded or found guilty of any Tick 'No' where an expiation notice only was received)	Yes		No		
2.		eived a written counselling or warning or been dismissed or resigned from any lunteer role in response to, or following allegations of improper or unprofessional kplace?	Yes		No		
3.		are you currently the subject of an investigation or any other process relating to u as a volunteer or an employee?	Yes		No		
		en the subject of allegations of misconduct by you of a sexual nature towards or d (person under 18 years of age) or towards any other person to whom you were oviding care?	Yes		No		
5.		nclude asking referees whether there are any child protection concerns in your resee any problem arising from this process?	Yes		No		
PLEASE NOTE: If you answer YES to any of the above questions, you are required to provide comprehensive supporting details, including relevant documentation in order to be considered. (Please attach as separate sheets.)						g	
If you choose not to answer one or more of the above questions, please indicate by ticking the box below that you wish to meet with the Principal (or delegate) to discuss.							
	I have opted not to answer one or more of the above questions and ask that a meeting be arranged between the <b>Principal</b> (or delegate) and me.						
		a meeting to be arranged you must submit your application at least one week prior nd ongoing requirements	to com	mence	ment o	late.	
Evide		story that may be unrelated to any risk of harm to children will not automatically prec	clude a	persoi	n from	being or	
The requirement for full and honest disclosure is a condition of initial and ongoing engagement. In signing this form you declar are a fit and proper person of good character, and you will notify the <b>Principal</b> should there be a relevant change in your circular for example, criminal charges and convictions, restraining orders, intervention orders, injunctions, disciplinary proceed investigations.				circum	stances;		
Please you a	e provide this comp nd arrange an interv	leted declaration form to the <b>centre, preschool or School/College</b> you want to vo view or an informal conversation.				contact	
		convicted of, or granted bail in relation to a sexual offence against a child you are rec ediately and if you are accused, convicted or granted bail you will need to immediat				services	
Decla	aration						
		e or misleading information I provide will result in me not being considered for a volosition. I declare that I have answered this Volunteer Declaration Form truthfully.	untary	positio	n or ma	ay result	
Sigr	ned:	Date:					
OF	FICE USE:						
Prin	ncipal (or delegate) Sign	ature: Date:					