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VOLUNTEER APPLICATION FORM

Applicant's FULL name: _____

Date of birth: _____ Email address: _____

Residential Address: _____

Postal (if different from above): _____

Contact numbers: (Home) _____ (Mobile) _____

Education & Professional Training

Please list all short courses, certificates (incl. VCE), diplomas and degrees you have completed or are currently undertaking.

<u>Course / Certificate / Degree</u>	<u>Institution</u>	<u>Dates commenced & completed</u>

Work experience

Please list all work experience you have had including paid employment and volunteer positions.

<u>Position</u>	<u>Company / Organisation</u>	<u>Dates of employment</u>

If yes, briefly describe when / how you came to accept Jesus as Lord and Saviour:

If you do not have a personal relationship with Jesus, what do you believe? How would you describe your belief system?

Have you ever been involved in the occult, false religions, witchcraft (etc)? Yes / No

If yes, please give details (include years of involvement):

Is there any other information you can provide that may be helpful for Life-Gate staff to be aware of? (NB: All information provided will be kept confidential)

Do you regularly attend church?

Yes / No

If yes, please complete the following questions:

Name of church: _____ Years attended: _____

Pastor / Minister's name: _____ Contact no.: _____

Do you have any responsibilities in your church? Please specify.

Are these responsibilities likely to conflict with your Life-Gate involvement? Why or why not?

Working With Children Check

As Life-Gate has involvement with youth and minors, all volunteers are required to hold a current 'Working with Children Check'.

Do you hold a valid WWCC card?

Yes / No

WWCC No: _____ Expiry date: _____

Note: If you do not hold a current WWCC card, our team can assist successful applicants with the online application process.

References:

Please provide the names and contact details of 3 references. Preferably, (i) an employer, (ii) your church pastor or minister and (iii) someone who works or lives with you.

Name:	Relation to you:	Contact details:
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Applicant's signature: _____ **Date:** _____

FOR OFFICE USE ONLY

DATE APPROVED: ____ / ____ / 2021 AUTHORISED BY: _____