



Motor Neurone Disease Association of WA Inc
Centre for Neurological Support
The Niche
Suite B/11 Aberdare Road
Nedlands WA 6009
Phone: (08) 9346-7355
Fax: (08) 9346-7332

VOLUNTEER APPLICATION FORM

CONFIDENTIAL

Name: _____

Address: _____

_____ Postcode: [] [] [] []

Telephone: (Home) _____ (Work) _____

Contact in emergency: _____

Telephone: (Home) _____ (Work) _____

Date of Birth: _____

Skills and Interests:

1. Education background: _____

2. Current occupation: _____

3. Hobbies, skills, interests: _____

4. Volunteer Experience _____

5. Experience with people with MND _____

6. Experience with people with other illnesses: _____

7. Have you been bereaved during the last eighteen months? [] No [] Yes

Availability:

1. What days/times are you available for volunteer work?

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
AM							
PM							

See overleaf ⇒

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(Continued)

2. What postcode areas are most convenient for you? _____

3. Do you have a car/other vehicle available for your volunteer work?
[] No [] Yes

4. Is the vehicle insured? [] No [] Yes

5. Do you hold a current driving licence? [] No [] Yes

6. Drivers Licence number: _____ Expiry date: ____/____/____

7. Do you have any physical limitations or are you under any course of treatment that might limit your ability to perform certain types of work? [] No [] Yes

8. Please list two (2) referees (not family) whom we might contact:

Name: _____ Telephone: _____

Name: _____ Telephone: _____

9. How did you hear about us?

- | | | |
|--|--|--|
| <input type="checkbox"/> Volunteer Centre Referral | <input type="checkbox"/> Newspaper | <input type="checkbox"/> Friend |
| <input type="checkbox"/> Volunteer/Staff | <input type="checkbox"/> Agency client | <input type="checkbox"/> Training course |
| <input type="checkbox"/> Brochure | <input type="checkbox"/> Library | |
| <input type="checkbox"/> Other (please explain): _____ | | |

10. Are you committed (at this time) to any other training, work (paid or unpaid), travel plans which could affect your future availability? [] No [] Yes

11. Do you have a current police clearance [] No [] Yes

It is a condition of the General Volunteer policy of MNDA WA (February 2000) that all volunteers appointed from that time should have a current police check. The Association will apply for a Federal police check under the new Volunteer National Police Check Program at no cost to you.

Thank you for applying to be an MND volunteer.
Executive Officer