



ONE ANOTHER CHURCH

Love God, Love One Another, Love Our Community

Volunteer Application Form

Personal details

| | | | | | |
|---------------------------------------|---|-----------------------------------|-----------------------------------|----------------|--|
| Name: | | | | | |
| Date of birth: | | Age: | | Gender: | |
| Mobile number: | | Email: | | | |
| Address: | | | | | |
| Legal Marital Status: | <input type="checkbox"/> single | <input type="checkbox"/> married | <input type="checkbox"/> de-facto | | |
| | <input type="checkbox"/> separated | <input type="checkbox"/> divorced | | | |
| | <input type="checkbox"/> other (please specify) | | | | |
| Emergency contact: | | | | | |
| Relationship: | | Mobile number: | | | |
| Current WWCC Blue Card Number: | | Expiry: | | | |

Note: you can apply for a Blue Card online at <https://my.bluecard.qld.gov.au/>

Church background

| | | | | |
|---|------------------------------|--|---|--|
| Are you "born again"? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, when? | |
| Have you been baptised in water? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Have you been baptised with Holy Spirit? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| When did you start attending One Another Church? | | What churches have you previously attended? | | |

Personal references

Your two referees can be a current or previous pastor, church leader or employer, but not a relative.

| | | | | |
|-----------|-----------------------|--|-----------------------------|--|
| Referee 1 | Name: | | Relationship to you: | |
| | Mobile number: | | Email: | |
| Referee 2 | Name: | | Relationship to you: | |
| | Mobile number: | | Email: | |

| | | |
|--|------------------------------|-----------------------------|
| Is there anything that may deem you unfit to volunteer in church ministry | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you willing to complete the necessary induction training and ongoing training to volunteer at One Another Church? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

I declare that the information provided in this document is true and correct to the best of my knowledge and belief.

| | | | |
|-------------------|--|--------------|--|
| Signature: | | Date: | |
|-------------------|--|--------------|--|

Office use only:

| | |
|--|--|
| Date of referee check: (attach documentation from check) | |
| Date of WWCC Blue Card Number Clearance: | |
| Date of criminal record check: (if applicable) | |
| Comments or Additional Information: (Please attach any relevant documentation regarding an applicant being unsuitable) | |

Endorsement of Church Leadership

| | | | |
|-------------------|--|------------------|--|
| Name: | | Position: | |
| Signature: | | Date: | |