

# Volunteer Application Form

**Thank you for your interest in volunteering with the RSPCA ACT**

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We rely on the community to continue to provide care for the thousands of animals that come to our shelter every year. Our volunteers provide invaluable assistance in many different areas and are an integral part of our organisation.

## **Steps to Becoming a Volunteer**

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### **Working with Vulnerable People Registration**

All volunteers are required to hold Working with Vulnerable People (WWVP) registration. WWVP registration involves a background check and is free for volunteers to obtain. You can apply online through Access Canberra ([www.accesscanberra.act.gov.au](http://www.accesscanberra.act.gov.au)), or you can visit any of the Access Canberra shopfronts. Processing generally takes up to eight weeks.

### **Pre-reading**

All prospective volunteers must read the RSPCA ACT Volunteer Handbook prior to making an application to become a volunteer.

Applicants wishing to work in Animal Based roles must be satisfied they are able to meet the 'Essential Capabilities for RSPCA ACT Animal Based Roles' prior to making an application.

These documents can be located on the volunteer and foster care pages of our website.

### **Application process**

Please provide detailed responses to the questions outlined within this form as this information will be used to assess your suitability for one of our volunteer roles. Once your application has been received and assessed you will receive instructions on the next steps. Following this, you will be required to complete an onsite orientation and induction.

Your privacy is important to us and all personal information you provide will be managed in accordance with the requirements of the Privacy Act 1988 and the Australian Privacy Principles, and our RSPCA ACT privacy policy which can be found on our website.

### **Uniform requirement**

All volunteers will be required to pay \$30.00 for a volunteer polo shirt. Volunteers are to wear long pants (jeans are suitable) as well as closed in footwear (boots/runners)

Please feel free to contact us with any questions. We look forward to hearing from you.

E: [volunteers@rspca-act.org.au](mailto:volunteers@rspca-act.org.au)

Phone: 02 6287 8100 PO Box 3082, Weston Creek ACT 2611

<b>Personal Information</b>				<b>Date</b>				
<b>Given Names</b>				<b>Surname</b>				
<b>Date of Birth</b>				<b>Gender</b>				
<b>Street Address</b>								
<b>Suburb</b>			<b>Postcode</b>					
<b>Email Address</b>								
<b>Contact Numbers</b>		<b>Home</b>		<b>Work</b>		<b>Mobile</b>		
<b>Are you an RSPCA ACT member?</b>						<b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/>		
<b>Emergency Contact Details</b>								
<b>Name</b>			<b>Contact Number</b>			<b>Relationship to you</b>		
<b>References</b>								
<b>Please include the details for one referee.</b>								
<b>Name</b>			<b>Contact Number</b>			<b>Relationship to you</b>		
<b>Working with Vulnerable People (WWVP) registration - This is a requirement for all volunteers</b>								
<b>Please complete the details below and include a copy of your card with this application.</b>								
<b>WWVP Registration No.</b>					<b>WWVP Expiry</b>			

<b>Availability</b>							
<b>What is your work status?</b>			<b>Full time</b> <input type="checkbox"/>		<b>Part time</b> <input type="checkbox"/>	<b>Casual</b> <input type="checkbox"/>	<b>Student</b> <input type="checkbox"/>
			<b>Home duties</b> <input type="checkbox"/>				
<b>Please indicate your volunteering availability below.</b>							
<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>Saturday</b>	<b>Sunday</b>	
<b>How many hours would you like to volunteer?</b>		<b>Per week</b>		<b>Per month</b>			

**Declaration**

It is important that volunteers of the RSPCA ACT are aware of the Society’s policies and positions on animal welfare and that they uphold RSPCA values. For these reasons, the following information is required.

In relation to your treatment of, or your responsibility for, an animal, including matters involving mistreatment or neglect, have you ever been visited or spoken to by:

- The police, whether State/Territory or Commonwealth;
- A uniformed inspector of an animal welfare organisation performing functions under animal welfare legislation; or
- Any government agency, whether local, State/Territory or Commonwealth

Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, provide details:
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As outlined earlier within this form, there is an expectation you would have read certain documentation prior to submitting this form to us for consideration. Please confirm which of the following documents you have read:

RSPCA ACT Volunteer Handbook	Yes <input type="checkbox"/> No <input type="checkbox"/>
Essential Capabilities for RSPCA ACT Animal Based Roles	Yes <input type="checkbox"/> No <input type="checkbox"/>

I, \_\_\_\_\_ declare that all information given with this application is true and correct. I agree that I am applying to be a volunteer for RSPCA ACT, a volunteer being “someone who enters into any service of their own free will, or who offers to perform a service or undertaking for no financial gain” and that no contract of employment is created by the acceptance of my application or the service I provide. I agree that RSPCA ACT may reject my application for any reason and, if my application is accepted, may terminate my engagement as a volunteer at any time and for any reason.

Thank you for completing this application. Please return it to:

Email [volunteers@rspca-act.org.au](mailto:volunteers@rspca-act.org.au)      Post - PO Box 3082, Weston Creek ACT 2611

This part of the form is to be completed by those wishing to volunteer at events or within the shelter.

<b>Interests, Skills and Experience</b>	
<b>Why have you decided to volunteer with the RSPCA ACT?</b>	
<b>Which volunteer area/role are you applying for?</b>	
<p><b>Remember - most volunteers commencing in animal-based roles will start out in husbandry &amp; socialisation roles. Please note that this role still involve interaction with animals. Dog walkers will need to be able to handle dogs of a wide variety of size and ability. Dog walkers will need to undergo training and assessment prior to appointed a walking position. Please also note that applicants applying for animal-based roles, must be able to meet the 'Essential Capabilities of RSPCA ACT Animal Based Volunteer Roles'. Please see our website for further information.</b></p> <p><b>Please provide an overview of the skills and experience you would bring to that role. i.e. if applying for a role in Kennels, provide an overview of your experience with dogs, including breeds, sizes, activities etc.</b></p>	
<b>Kennels</b>	
<b>Cattery (includes rabbits and other small animals)</b>	
<b>Domestics</b>	
<b>Administration</b>	
<b>Events</b>	
<b>Other</b>	
<b>How do you think you will cope knowing that in some situations, when it is in the animal's best interest, they might need to be euthanised by the RSPCA ACT?</b>	

<b>Medical Information</b>	
<p>Ensuring our volunteers are safe and supported is important to us. Your answer to the following questions will help meet our mutual needs and allow us to consider any reasonable adjustments that may be required to enable you to perform volunteer tasks.</p> <p>Please note that we are unable to engage pregnant women as volunteers due to the nature of the volunteer roles and the fact that our volunteer insurance cover does not extend to volunteers who are pregnant.</p> <p>Please also note that all applicants for animal-based roles must be able to meet the 'Essential Capabilities of RSPCA ACT Animal Based Roles', for safety reasons, reasonable adjustments cannot be made in these areas.</p>	
<p>Please include information about all health-related issues (including any physical or psychological medical condition, disability (physical or intellectual), allergy, or past injury, as well as any medication which you are taking or medical treatment which you are undergoing).</p>	
<p>Do you currently:</p> <ul style="list-style-type: none"> <li>• suffer from any health-related issues, allergies and/or medical conditions or injuries (past or present)?</li> <li>• take regular medication?</li> <li>• undergo regular medical treatment?</li> </ul>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>If yes, please provide details.</p>	
<p>Are there certain tasks which you are unable to safely undertake?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>If yes, please provide details.</p>	
<p>Do you have any form of disability (physical or intellectual)?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Please advise of any support requirements you may have or any personal considerations which may impact tasks you will be required to perform in your volunteer role.</p>	