



VOLUNTEER APPLICATION FORM

| | Title | First Name | Last Name |
|-------------------------|-------------------------|-------------------|-----------|
| Your Name: | | | |
| Postal Address: | | | |
| Town: | | Postcode | |
| E-mail Address: | | | D.O.B: |
| Home No: | | Mobile No: | |
| Drivers Licence Number: | Expiry Date of Licence: | Years of driving: | |

Declaration: I agree to acquire a Working with Children Check and abide by the aims of SCARF as below

Signed: _____ **Date:** _____

(Information on how to apply for a Working with Children Check will be provided after your initial interview).

The AIMS of SCARF are to:

1. *provide assistance and/or referral for refugee entrants*
2. *promote awareness of issues affecting refugee entrants*
3. *undertake activities and projects that will enhance education and employment opportunities for refugee entrants*
4. *build a strong and credible Association together with and on behalf of refugee entrants*
5. *reflect and respect the diversity of culture and ethnicity within the Association*

WAYS YOU CAN HELP - Please indicate your areas of interest:

- Mentoring a family or individual** - *This requires a commitment of 6-12 months, with weekly phone calls and regular visitation PLUS being available to assist the individual/family in their re-settlement process. Some training will be provided.*
- Tutoring or assisting with homework for High School students** (at Wollongong City Library)
This requires a regular commitment of 1½ -2 hrs one afternoon per week
- Tutoring or assisting with homework for Primary School students in their home**
This requires a regular commitment of 1 -1½ hrs one afternoon per week
- Providing computer literacy classes**
This requires a regular commitment of 1 -1½ hrs one afternoon per week (eg. Basic computer skills, email, internet and Word application)
- Providing Driving Supervision for L plate drivers**
This requires providing 1- 1½ hrs of driving supervision per week, in a vehicle provided by SCARF. Guidelines for this project are on the SCARF website under L2P
- Providing administration / office support to SCARF**

Please indicate your current/previous profession or area of work.

Please nominate any other ways you think you could help: e.g. other skills or hobbies.

Do you have a have a preference to assist refugees from a particular country or region e.g. Asia/Africa etc?

If so please nominate the country or region:

Do you prefer to assist a particular age group e.g. Primary Secondary TAFE/Uni Adults

If so please nominate your preference:

Do you speak other languages?

If so please state other languages:

What days are you available for volunteer work / driving supervision?

Becoming a SCARF Inc. Member

I understand I do not need to be a Member of SCARF Inc. to undertake volunteer activities.

I wish to join as a SCARF Inc. member (see SCARF Membership Application Form)

I do not wish to be a member at this time, but I would like to make a donation to SCARF

\$ _____ SCARF Inc. is a registered charity & donations over \$2 are tax deductible.

Payment Method

Cash Cheque Direct Deposit - Illawarra Credit Union Ltd, BSB 802 249 Acc No: 26112697

Or please post to: **SCARF Inc. PO Box 312 CORRIMAL NSW 2518**

SCARF office use only

Working with Children Check No: _____ EXPIRES: _____ VERIFIED: _____

Received: _____ Receipt No: _____ MYOB: _____ Data Base: _____