Mercy Works

MERCY WORKS CONNECT

New South Wales
Victoria
Western Australia

VOLUNTEER MENTOR APPLICATION

Date: _____

Name: _____

Gender: ☐ Male ☐ Female Country of Birth _____

Date of birth (dd/mm/yy - Required for Mercy Works to verify Working with Children Check) _____

Address: _____ State: _____ Post Code: _____

Email: _____

Mobile: _____ Home Phone: _____

Driver's Licence: ☐ Yes ☐ No Own Car: ☐ Yes ☐ No

First Language: _____

Other Languages (please indicate fluency):

1. _____ ☐ Excellent ☐ Average ☐ Basic

2. _____ ☐ Excellent ☐ Average ☐ Basic

Are you currently:

☐ Studying ☐ Retired ☐ Unemployed ☐ Home Duties ☐ Employed Part-time

List current employer and position (if any):

_____

Please note that the nature of this volunteer role means that previous experience working in an education setting is an advantage.

Previous positions held:

Education (indicate qualifications and institutions):

Previous volunteer experience (if any). Give details of previous volunteer position, organisation and length of time you were there:

Emergency Contact: _____ Phone: _____Relationship: _____

Do you currently possess a Working with Children Clearance (WWCC) /VIC Inst. of Teaching Card? ☐ Yes ☐ No

WWC Number_____ Expiry: _____

Do you currently possess a National Police Clearance? ☐ Yes ☐ No

The time commitment required is a *minimum* 3 hours per week during school time for 1 school year. Please indicate the day and time you are available.

Mon: _____ Tue:_____ Wed: _____ Thu:_____ Fri:_____

NB: You will also need to be available to attend approximately one meeting per school term.

Why would you like to volunteer with the Mercy Works Connect Project?

What are the skills and attributes you can bring to this volunteering position?

Provide the names of two referees (preferably professional):

Name Referee 1: _____ Name Referee 2: _____

Organisation:_____ Organisation: _____

Role in Organisation:_____ Role in Organisation:_____

Email:_____ Email: _____

Phone:_____ Phone: _____

How did you learn about this position? _____

Please email or post to the contact in your state:

VICTORIA
MWC Coordinator
Mercy Works Connect Victoria
607-611 Nicholson St
Carlton North 3054
Ph: 03 9389 8200
E: katherine.cooney@mercyworks.org.au

SYDNEY
MWC Coordinator
PO Box 2023
North Parramatta NSW 1750
Ph: 02 9564 1911
E: paul.taylor@mercyworks.org.au

PERTH
MWC Coordinator
c/- Mercy Congregation Centre
60 John St Northbridge WA 6003
Ph: 0406 233 102
E: nancy.hourani@mercyworks.org.au