

TAMWORTH MEALS ON WHEELS

VOLUNTEER - APPLICATION

Date:

(Mr, Mrs, Ms) ...Full Name.....Criminal Record Check//....//.....

(Please circle)

Volunteering preference: / Driving /Other

Availability : Weekly Fortnightly Monthly

Preferred Geographical Location ?

Preferred Days Mon Tue Wed Thur Fri

Drivers: Car Registration No: Copy of / or details of Driving Licence Supplied Y / N

Comprehensive Insurance Details for vehicle (Compulsory):

Comprehensive Insurance is a requirement of using the vehicle for volunteering. (Please advise if details change)

Company: **Policy Number:**

All applications will be presented to the Management Committee for Approval

VOLUNTEER AGREEMENT

Thank you for agreeing to become a Volunteers for Tamworth Meals on Wheels Inc.

This agreement is made between:-**The Management Committee of Tamworth Meals on Wheels Inc. and**

Name:Address:

PH: (Home).....**(Mobile)**.....Working as a volunteer

CODE OF SERVICE: Volunteers are expected to support Tamworth Meals on Wheels Inc. in their efforts to supply meals on a daily basis to clients, thus enabling them to remain in the familiar surrounding of their own home.

CONFIDENTIALITY: Principals of confidentiality and respect for the Clients rights must be adhered to at all times, to ensure that each Clients right to privacy and confidentiality are respected. Clients have the right to access their personal information held by the service.

INSURANCE: Tamworth Meals on Wheels Inc has accident coverage for volunteers. The Insurance coverage on volunteer motor vehicles is to cover the excess only. This cover is not available unless your car is **comprehensively insured**. Please report accidents immediately so TMOW can initiate a claim to recover your excess.

SUPERVISION & TRAINING: The Manager is available for discussion on any issues or concern that might arise during the performance of your duties; We all have a Duty of Care to our fellow citizens.

Duty of Care is based on the "neighbour principle". We are expected to exercise care not to cause harm to our "neighbours". In our case, we need to ensure that the food reaches the client and is safe to eat.

VOLUNTEER SUPPORT: Newsletters will keep you informed on any updates with regard to delivery service. A free phone counselling service is also available should you require support resulting from your volunteering.

PETROL SUBSIDY:Volunteer drivers are offered petrol reimbursement, calculated on the run kilometres. This is a Government Rebate and is not charged against the cost of the meal. You will be required to sign for receipt of this amount. If you do not wish to accept this rebate, a donation jar is available, and a receipt can be issued.

GRIEVANCE & DISPUTE PROCEDURE: Volunteers have equal rights within the Grievance & Dispute Procedure of the Tamworth Meals on Wheels Inc Policy & The Practice Manual.

Signed Volunteer E-mail address

For Office use only

Signed for and on behalf Tamworth Meals on Wheels Inc Management Committee

Approved : Meeting Date: Placement:

TAMWORTH MOW -Volunteer National Police Check

Full Name: _____ Male/Female/Unspecified

Previous Name(s): _____
(Include maiden name and other married names)

Date of Birth: ____/____/____ Town/City of Birth: _____

Country of Birth: _____

Current residential Address: _____

Postal Address: _____

Please provide all previous addresses for the last 5 years

Previous residential Address: _____

Previous residential Address: _____

Previous residential Address: _____

Please supply 2 forms of ID :

- o A scanned copy of Divers Licence or complete details below:

Name Exactly as appears on licence : _____

Licence No. _____ Card Number. _____ Expiry Date _____

- o A scanned copy of the Medicare Card or Complete details below:

Name Exactly as appears on card : _____

Card No. _____, Expiry Date _____

Position Number on card (usually a 1 or 2) : _____ Card Colour _____

Alternatively

First Proof of Identity	Second Proof of Identity
Australian Passport	Australian Passport
Birth Certificate	Australian Visa
Australian Citizenship Certificate	Australian Citizenship Certificate
Australian Migration Status (AMS) ImmiCard	Australian Migration Status (AMS) ImmiCar
Australian Visa	Marriage Certificate
RTA Identification Card	Health Care Card
	Pensioner Concession Card (PCC)
	Seniors Health Card (SHC)
	Australian Citizenship by Descent
	Change of Name Certificate

Please supply a copy of your proof of Covid-19 vaccination certificate

Sign: _____

Date: ____/____/____