



APPLICATION FOR SAFE CHURCHES LEADERSHIP

This application form shall be completed by all applicants for any leadership position (voluntary or paid), to be appointed by or on behalf of the Church.

Surname		Other Names		Previous names		Male/Female	
Mobile Phone			Home Phone		Email		
Address							
Date of Birth			Normal Occupation			Marital Status	
Working with Children Card/ Receipt No.		Note: Please attach a photocopy of Working with Children Check card.					
National Police Check/ Receipt No.		Note: Please attach a photocopy of your National Police Certificate & have original sighted by Church.					
Name of Church or Organisation applying to work for							
Area of ministry or activity for which this application is made							
Describe your personal, ministry & work experiences, including age groups and any work with children.							

Character Referees:							
Please provide details of at least three adults who can give a first-hand character reference concerning you, preferably within a recent area of ministry. Include at least one person from your current Church, one from your family and one from a different area of ministry. If this is not possible, other referees may be used.							
Name of Referee 1 - Local Church							
Phone contacts				Home		Mobile	
Church or Ministry Organisation							
Please indicate the name of Church or Organisation within which the Referee has known you							
Applicant's Ministry Involvement							
Details of the role fulfilled by you, and your ministry relationship with the Referee							
Approximate Dates of Involvement				Start Date		End Date	
Name of Referee 2 - Family Member							
Phone contacts				Home		Mobile	
Relationship							
Your family relationship with the Referee							
Name of Referee 3							
Phone contacts				Home		Mobile	
Church or Ministry Organisation							
Please indicate the name of Church or Organisation within which the Referee has known you							
Applicant's Ministry Involvement							
Details of the role fulfilled by you, and your ministry relationship with the Referee							
Approximate Dates of Involvement				Start Date		End Date	

Please tick "yes" or "no" for each question below.		
<i>NOTE: If the answer to any of the following is "yes", please give further details on a separate page. A "yes" answer will not automatically rule an applicant out of selection.</i>		
	Yes	No
1. Do you have any health problem(s) which may affect you volunteering for the church?		
2. Have you ever been convicted of a criminal offence?		
3. Have you ever been charged with a criminal offence?		
4. Have you ever had permission to undertake paid or voluntary work with children or other vulnerable people refused, suspended or withdrawn in Australia or any other country?		
5. Have you ever engaged in any of the following conduct, even though never having been charged? <ul style="list-style-type: none"> • Sexual contact with someone under your care other than your spouse (such as a parishioner, client, patient, student, employee or subordinate) • Sexual contact with a person under the age of consent • Illegal use, production, sale or distribution of pornographic materials • Conduct likely to cause harm to people, or to put them at risk of harm. 		
6. Has your driver's licence ever been revoked or suspended?		
7. Have you ever had an apprehended violence order, order for protection or the like issued against you as a result of allegations of violence, abuse, likely harm, harassment, stalking etc?		
8. Has a child or dependent young person in your care (as a parent or in any other capacity) ever been removed from your care, or been the subject of a risk assessment by the authorities?		
9. Have you done anything in the past or present that may result in allegations being made against you of child abuse? Abuse means: bullying; emotional abuse; harassment; neglect; physical abuse; or sexual abuse.		
10. Have you ever done anything in the past or present that may result in allegations being made against you of bullying or any form of harassment of adults?		
11. To your knowledge, have you ever been the subject of an allegation of sexual abuse or sexual misconduct?		
12. Do you have a history of alcohol or substance abuse or have you experienced difficulties with addiction? (including prescription, over-the-counter, recreational or illegal drugs, pornography)		
13. Is there any other relevant information or matter you think we should know about?		

Applicant's Statement

The information contained in this application is true to the best of my knowledge. I authorize the referees listed in this application, and any other relevant persons, to give the Church any information they may have regarding my character and fitness for ministry. I agree that the Church may contact people other than my referees, who know me, to assist in forming an opinion regarding my suitability.

Should my application be accepted, I agree to perform my services on behalf of the Church in a manner consistent with Biblical teaching, and I undertake to immediately advise the Church of any change in the information provided by me in this Application, or of any other information reasonably expected to impact my suitability when working with children and youth or any other area.

I agree to embrace and follow the BCWA Safe Churches Policy, Code of Good Leadership Practices and Risk Management & Safe Environment Guidelines.

Applicant's signature		Date	
Witness' signature		Date	

Please note: *The witness is to warrant the accuracy of the above Personal Details and is **NOT** to be a member of your family.*

Privacy Statement: The personal information you provide in this application is collected, stored and used by the Church in accordance with the Privacy Act, only for the purpose of the BCWA Safe Churches Policy. Your information will be securely stored and access to it carefully controlled. By making this application you agree to the Church disclosing this information to BCWA, and such Churches and other organisations as needed to fulfill this purpose. If some or all of this information is not provided, we may not be able to progress your application for Safe Churches Leadership.

Please return the completed form (marked CONFIDENTIAL) to your church ministry leader.