



**PETER CARNLEY**  
ANGLICAN COMMUNITY SCHOOL

## Volunteer Declaration

A Declaration per volunteer is required.

I \_\_\_\_\_ confirm that I have read, understood and agree to abide by the PCACS *Parent Code of Conduct* and the PCACS *Volunteer Policy*. This form is in compliance with the *ASC Recruitment Policy including National Police History Check and Working with Children Check*.

I would like to volunteer in the following areas (*please select as many boxes as you are able to assist with*):

Canteen

Classroom (includes excursions)

Library

Uniform Shop

Other \_\_\_\_\_

(*Please insert details*)

Please place a tick in one of the boxes below:

I declare that I do not have any convictions, circumstances or reasons that might preclude my working with or near children.

I declare that I do have convictions, circumstances or reasons that might preclude my working with or near children. The nature of these convictions, circumstances or reasons is outlined below.

\_\_\_\_\_  
\_\_\_\_\_

I certify the accuracy of the above information. I am aware that I may be required to provide a Police Clearance if it is considered necessary to verify the information provided. I understand that volunteering overnight (i.e. camps) will require me to obtain a Working With Children Check.

Volunteer Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(*Block – please print*)

Volunteer Signature: \_\_\_\_\_ Date of submission: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Volunteer Mobile: \_\_\_\_\_ Volunteer Email: \_\_\_\_\_

Please list your children enrolled at PCACS:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_