



# Volunteer Program

## Expression of Interest Form

I have attached my current resume with experience and previous positions listed

PERSONAL DETAILS			
Full Name			
Country of Birth		D.O.B.	
Languages (spoken/understood)			

CONTACT DETAILS				
Address			Email	
Address <small>(if applicable)</small>			Email 2 <small>(if applicable)</small>	
Suburb				
State		Postcode		

Home Phone			Mobile	
Work Phone			Other	

QUALIFICATIONS				
Degree/Course Name			Year(s)	
Degree/Course Name			Year(s)	

INTERESTS AND SKILLS <small>(can check multiple boxes)</small>			
Accounting	Community Welfare	Fundraising	Sales/Marketing
Administration	Customer Service	Gardening	Training/Coaching
Computer Education	Case Work Support	Graphic Design	Youth Support
Communication	Data Entry	Maintenance	Outdoor Activities
Counselling Support	Event Organisation	Pastoral Care	Reception
Other <small>(please specify)</small>	_____	Other <small>(please specify)</small>	_____
Other <small>(please specify)</small>	_____	Other <small>(please specify)</small>	_____

MICROSOFT OFFICE SUITE <small>(if applicable)</small>					
	Level	Basic	Intermediate	Advanced	Comments
Microsoft Word					_____
Microsoft Excel					_____
Microsoft Outlook					_____
Microsoft PowerPoint					_____

**SPECIFIC AREA OF INTEREST** (if applicable)

Area	Comments
Family and Relationship Support	_____
Education and School Support	_____
Office Administration and Support	_____
Community Development	_____
Pastoral Services	_____

**TRAVEL**

<b>Do you have a current driver's licence?</b>	Yes	No
<b>Do you have access to a private vehicle?</b>	Yes	No
<b>Do you have access to public transport?</b>	Yes	No
<b>How far are you prepared to travel?</b>		

**AVAILABILITY** (please check which of the below apply for each day)

	All Day	Morning	Afternoon	Evening	As Required	Specific Times
<b>Monday</b>						_____
<b>Tuesday</b>						_____
<b>Wednesday</b>						_____
<b>Thursday</b>						_____
<b>Friday</b>						_____
<b>Saturday</b>						_____
<b>Sunday</b>						_____

**Additional comments on availability** (ie: Weekly, Fortnightly, Monthly, during school terms etc...)

**What attracted you to volunteering with CatholicCare?**

**What would you like to gain from volunteering with CatholicCare?**

**Volunteers make an immense contribution to CatholicCare's services and programs, enabling us to reach out to more families and individuals who are vulnerable and disadvantaged.**

We thank you for your interest in Volunteering with CatholicCare. You can email or post this form to the Volunteer Coordinator to register your interest. If you have any additional questions, please don't hesitate to contact the Volunteer Coordinator at [volunteer@ccam.org.au](mailto:volunteer@ccam.org.au) or call 9926 5699.