

## EEE L2P Volunteer Mentor Application Form

Please return this form to the L2P Project Officer via email: [L2P@mcm.org.au](mailto:L2P@mcm.org.au)  
 PO Box 175, Balaclava, 3183  
 Please call **0421 976 629** for any queries.

**Your personal details**

Surname		Title	
Given names		Date of birth	
Address			
Phone numbers	Home		Mobile
Email address			

**Your emergency contact details (e.g. next of kin)**

Name		Relationship	
Address			
Phone numbers	Home		Mobile

**Volunteer entitlement**

Are you a citizen of Australia or New Zealand or a permanent Australian resident?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If you are not a citizen of Australia or New Zealand please indicate the type of visa you possess for Australia (evidence will be required)	

**Occupation:**

**Qualifications:**

**Pre-existing injury, disease or condition**

Do you have any pre-existing injury or illness that may be affected by the duties of this volunteer position (as outlined in the position description)?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If "Yes", please provide details	
<i>Please note that failure to notify a pre-existing injury or illness which might be affected by the nature of your proposed volunteering could result in that injury or illness being ineligible for future compensation/insurance claims.</i>	

<b>Why do you want to volunteer with the Melbourne City Mission L2P program?</b>

<b>Why do you think you would make a suitable mentor to a young person learning to drive?</b>

<b>Your availability</b>						
Monday <input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/>	Tuesday <input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/>	Wednesday <input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/>	Thursday <input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/>	Friday <input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/>	Saturday <input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/>	Sunday <input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/>
<b>How many hours are you available for per week?</b>						
<b>Melbourne City Mission has L2P programs in three locations. Please advise which location(s) you would be available to attend as advised in the volunteer advertisement.</b>						
Sandringham <input type="checkbox"/>		South Melbourne <input type="checkbox"/>		Prahran <input type="checkbox"/>		

<b>Signature</b>		<b>Date</b>	
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<b>Professional referee</b>	<b>Personal referees</b>
<b>Name:</b>	<b>Name:</b>
<b>Position, Organisation:</b>	<b>Relationship:</b>
<b>Ph:</b>	<b>Ph:</b>
<b>Email:</b>	<b>Email:</b>

<b>Office Use Only</b>	
<b>Working with Children Check</b>	<b>Police Check</b>
<b>Card Number:</b>	<b>Lodged:</b>
<b>Expiry Date:</b>	<b>Approved:</b>
<b>Card sighted:</b>	<b>ID sighted:</b>
<b>Worker"</b>	<b>Worker</b>