

Volunteer Application Form

Contact Details

First Name _____

Last Name _____ Date of Birth _____

Address _____

Suburb _____ Postcode _____

Postal Address _____

Suburb _____ Postcode _____

Home Phone _____ Mobile _____

Email _____

Preferred method of contact Any Email Phone

Are you from a non English speaking background? _____

If yes, what other languages do you speak? _____

Interests / skills / hobbies _____

Qualifications _____

Occupation (current / previous) _____



Have you ever done volunteer work before? _____

If yes, please give details _____

Transport / Licence Information

Do you have a drivers licence? _____ Type _____

If yes, what is your licence number? _____ Expiry Date _____

Can you drive a manual car? _____

Do you have your own vehicle? _____

Is this vehicle comprehensively insured? _____

Your volunteering interests *(please circle which applies)*

Admin Baulkham Hills

Admin Rouse Hill

No Interest Loans (NILS)

Hills CarPal

Community Bus Driver

One 2 One

Homework Help

Seniors Computer Class

Supported Playgroup

Special Events

Learning in the Hills

Hills Daily Grind Coffee Van

Completed applications can be emailed to bronwynm@hca.org.au or posted

Bronwyn Millington
Volunteer Co-ordinator
Hills Community Aid
390 Windsor Road
Baulkham Hills 2153

