

HUGHES BAPTIST CHURCH

a dynamic Christ-centred community sharing Jesus' life-changing power

Safe Ministry Check

Created 18/06/2018

PERSONAL DETAILS

SURNAME						
CHRISTIAN NAMES						
PREVIOUS NAMES						
MALE/FEMALE						
MARITAL STATUS						
DATE OF BIRTH						
ADDRESS						
PHONE	M:		H:		W:	
E-MAIL						

Please circle either "YES" or "NO" for each question

If the answer to any of the following questions is "yes", please give details on a separate page if necessary.

NOTE: A 'yes' answer will **not** automatically rule out an applicant out of selection.

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|--|-----|----|
| 1. Do you have any health problem(s), which may affect you volunteering for the church? | YES | NO |
| 2. Have you ever been charged with and/or convicted of a criminal offence? | YES | NO |
| 3. As an adult (18 yrs.) have you ever engaged in any of the following conduct; | YES | NO |
| · 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 | | |
| 4. Have you done anything in past or present that may result in allegation being made against you of abuse? <i>Abuse means: bullying, emotional abuse; harassment; neglect; physical abuse; or sexual abuse against a child or an adult.</i> | YES | NO |
| 5. To your knowledge, have you ever been the subject of an allegation of sexual abuse or sexual misconduct? | YES | NO |
| 6. Have you ever had an apprehended violence order, order for protection or the like issued against you because of allegations of violence, abuse, likely harm, harassment, stalking, etc? | YES | NO |
| 7. 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ever had permission to undertake paid or voluntary work with children or other vulnerable people refused, suspended or withdrawn in Australia or any other country? | YES | NO |
| 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? | YES | NO |
| 9. Has your driver's licence ever been revoked or suspended? | YES | NO |
| 10. Have you a history of alcohol abuse or a history of substance abuse including prescription, over-the-counter, recreational or illegal drugs? | YES | NO |

RECORD OF CHRISTIAN CHURCH MEMBERSHIP (if in the congregation less than 3 years)

List church organisations, churches, congregations with which you have been associated (attach page if necessary):

Name of church	Location	When (Month/Year)	Positions held
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CHARACTER REFERENCES (if you have been at Hughes Baptist less than 3 years)

Please provide two referees. Referees must be over eighteen years of age and be able to give a report (by telephone only) on your good character and suitability for ministry.

REFEREE 1		REFEREE 2	
NAME		NAME	
PHONE		PHONE	
Relationship?		Relationship?	

CRIMINAL HISTORY CHECK AND/OR WORKING WITH VULNERABLE PEOPLE CHECK

I hereby consent to an Australian Federal Police Check id one is considered necessary for my role.

Working with Vulnerable People number for verification when necessary for my role;

NUMBER: _____

Verification Date: _____

CONSENT TO HOLD INFORMATION

I consent to the information contained in this application including the subsequent pages to be kept by Hughes Baptist Church. I understand that this information will be kept in a confidential file and used only for screening and disciplinary purposes.

DECLARATION

I, _____
of _____

Do solemnly and sincerely declare that:

1. The information I have provided in this application and the information contained in any documents accompanying this application are true and correct to the best of my knowledge & belief.
2. I understand that any material misstatement in or omission from this questionnaire may render me unfit to hold a particular or any office in the church.
3. I have received a copy of the **Code of Conduct** relevant to my role, and I agree to uphold it.

Applicant's Signature: _____

Date Declared: _____

WITNESS TO APPLICANT'S CHECK

Name and office of witness: _____

Signature: _____

Date: _____

Endorsement of the Senior leadership for this person to volunteer:

NB: Please seek legal advice if you are uncertain about signing this document.