

MENAI BAPTIST CHURCH

Please Note: This is a sensitive document that will be stored in a confidential manner accessible only to a limited number of authorised persons. Full records of the processes below (including interview notes, referee checks and induction content) will be kept in the relevant staff and volunteer admin file)

SAFE MINISTRY SCREENING

		•			
Personal Details:					
Surname:					
Given Names:				Male	Female
Previous Name/s (if a	pplicable):				
Address:					
Phone:	Email: Date of Birth:				
WWCC (if required):					
Do you have any heal	th conditions that we s	ould know about?			
<u>-</u>	attended regularly in				1
Name of Church:		ocation:			When:
REFEREES:		a count has a sea of 10 years			wt a.u
	nistry. Referees may be	e over the age of 18 years art of the church.	s and able to give a	verbai repo	rt on your character
Name:				Phone:	
Name:	Name:			Phone:	
DECLARATION:					
l,		sincerely de	clare that,		
The information	I have provided in this	oplication is true and cor	rect to the best of	my knowled	ge and belief.
	•	eading information or wi at I am unsuitable to serv			m this questionnaire,
I have received a	a copy of the <i>Code of C</i>	nduct and am willing to u	uphold it.		
Applicant's Signature:			Date:		
Parent/Guardian's Sig	nature (if under 18 yrs			Date:	

Complete this page only if applicant is over 18 years. If under 18 years,	go to the	next page.	
WWCC Number: Expiry	/ Date:		
Have you completed <i>Creating Safe Spaces</i> training or equivalent from another	r organisati	ion? Yes	No
If yes, where?		When?	
Please attach a copy of your certificate		•	
I consent to:			
Verification of my WWCC NUMBER (If required)	Yes	No	
A national police check (for staff only)		Yes	No
SIGNATURE OF APPLICANT:			
Please tick 'YES' or 'NO' for each of the following questions. If you answer 'YES give details on a separate page or discuss with the senior pastor or the person your church. Note: A 'YES' answer will not automatically disqualify an applicar Please note that, if you disclose any potentially criminal actions, the church mapplice or other relevent government authorities.	holding an	equivalent lead	dership role in
For all staff and volunteers:			
Have you ever been charged with and/or been convicted of a criminal offer	nce?	Yes	No
2. As an adult (18+yrs) have you ever engaged in any of the following conduct	:-		
Sexual contact with someone under your care other than your spouse (superishioner, client, patient, student, employee or subordinate)	ıch as a	Yes	No
Use, posession, production or distribution of child abuse material?		Yes	No
Sexual contact with a person under the relevant age of consent		Yes	No
3. To your knowledge, has there ever been any allegations made against you rany abuse of a child, physical abuse or sexual misconduct?	egarding	Yes	No
4. Have you ever had an apprehended violence order, order for protection or the like issued against you as a result of allegations of violence, abuse, likely harm, harassment, stalking, etc?		Yes	No
5. Have you had a history of alcohol or substabce abuse (including prescription the-counter, recreational or illegal drugs)?	n, over-	Yes	No
6. Has your driver's licence ever been revoked or suspended? (if the ministry involves driving)	role	Yes	No
For staff and volunteers in pastoral ministry, leadership or engaged in	child-relat	ed work or w	ork with
vulnerable adults.	11.1		Т
7. Have you ever had permission to undertake paid or voluntary work with ch other vulnerable people refused, suspended or withdrawn in Australia or any country?		Yes	No
8. Has a child or dependent young person in your care ever been removed fro care by relevant authorities?	m your	Yes	No

Please complete this page if t	he applicant is unde	er 18 years.			
Name of at least one parent/gua	rdian:				
Contact phone for parent/guardi	ian				
	.	uestions. If the answer to any of th he senior pastor or the person hold	٠.	•	
A 'YES" answer will not automati	cally disqualify an app	licant for selection.			
Please note that, if you disclose a police or other relevant government		al actions, the church may need to	report this info	rmation to the	
Have you ever been charged with and/or convicted of a criminal offence?				No	
Have you a history of alcohol of scounter, recreational or illegal di	Yes	No			
To your knowledge, has there ev abuse of a child, physical abuse o	Yes	No			
	СНІ	URCH USE ONLY			
CSS training or Teensafe training undertaken Yes No				Date:	
WWCC number supplied:	Yes	N/A	Expiry Date:		
WWCC verified by		Date:			
Signed Code of Conduct received	Date:				
Entered into safe church register	Date:				
Interview led by	Date:				
Referee checks conducted by				Date:	
Volunteer endorsement by	Date:				
Induction led by	Date:				
Volunteers must be endorsed by	a member of pastoral	staff, leadership council or safe ch	urch team.		