

the anglican diocese of canberra and goulburn

The Safe Communities Unit LEVEL 4 221 LONDON CIRCUIT CANBERRA CITY, ACT Please address all correspondence to: GPO BOX 1981 CANBERRA, ACT 2601 T (02) 6232 3610 (Administrative Assistant) T (02) 6232 3620 (Direct) M 0427 533 159 E celia.irving@anglicancq.orq.au

VOLUNTEER LAY CHURCH WORKER - SAFE MINISTRY CHECK

To be used for all **Lay Church Workers**¹ in child, young person or vulnerable adult²related ministries.

PERSONAL DETAILS

| Title | | Surname | | | | |
|----------------------------|--|---------|--|--|--|--|
| Christian names | | | | | | |
| Previous names | | | | Male/female Please circle as appropriate | | |
| Address | | | | | | |
| Home phone number | | | | | | |
| Work phone number | | | | | | |
| Mobile phone number | | | | | | |
| Email | | | | | | |
| Date of birth, if under 18 | | | | | | |
| Position/s applied for | | | | | | |
| Parish | | | | | | |

Privacy Statement

Any personal information you provide is protected under the *Privacy Act 1988* and is collected by the Safe Communities Unit for the purpose of your involvement with the Diocese. It will be kept in a confidential file and used in implementing the Diocesan Due Diligence Protocol. It can only be disclosed to someone else if you have been given reasonable notice of the disclosure; where disclosure is authorised or required by law or is reasonably necessary for the enforcement of the criminal law; if it will prevent or lessen a serious and imminent threat to a person's life or health; or if you have consented to the disclosure.

However, if you choose not to provide the information requested, we may not be able to process your questionnaire or properly consider you for a role. If you have questions or concerns about how your personal information is handled you can contact Celia Irving by emailing: celia.irving@anglicancq.org.au.

Lay Church Workers:

Please submit your completed questionnaire to your Rector, Priest-in-Charge or Ministry Coordinator.

Rector, Priest-in-Charge or Ministry Co-ordinator: When you receive the completed questionnaire, please retain the original as a confidential document stored securely with restricted access and send an electronic copy to celia.irving@anglicancg.org.au or hard copy to the Safe Communities Unit.

THE SAFE COMMUNITIES UNIT GPO BOX 1981 CANBERRA ACT 2601

¹ A **Lay Church Worker** is a non-ordained person exercising a ministry role.

² A **Vulnerable adult** is an adult at higher risk of abuse due to their mental health, disability, age or life circumstance.

| QUESTIONS | Yes | No |
|---|-----|----|
| Please tick either "YES" or "NO" for each question. Where a YES answer is given it will not automatically rule an applicant out of selection. However, in these situations the Application will be forwarded to the Safe Communities Unit for assessment before an appointment can be made. | | |
| Wherever a YES answer is given, please provide relevant information regarding your response on a separate paper and indicate the current status, of the issue, if any. | | |
| Do you have any health problem(s), which may affect your work with children, young people or vulnerable adults? | | |
| 2. Have you ever been charged or convicted of a criminal offence? | | |
| Have you ever had permission to undertake paid or voluntary work with children, young people or vulnerable adults refused, suspended or withdrawn in Australia or any other country? | | |
| 4. Have you ever engaged in any of the following conduct, even though never having been charged? | | |
| 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 a child, young person or vulnerable adult, or to put them at risk of harm. | | |
| 5. Has your driver's licence ever been revoked or suspended? | | |
| 6. 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? | | |
| 7. Has a child or dependent young person or vulnerable adult 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? | | |
| 8. Have you done anything in the past or present that may result in allegations being made against you of child abuse? | | |
| Child abuse means: bullying; emotional abuse; harassment; neglect; physical abuse; or sexual abuse. | | |
| Have you done anything in the past or present that may result in allegations being made against you of bullying or any form of harassment of adults? | | |
| Have you a history of alcohol abuse or a history of substance abuse including recreational or illegal drugs and misuse of prescription, over-the-counter medications? | | |

BACKGROUND CHECKS

| Aspect of | | | l۵ | v NAis | ictm. | Polo | | |
|-----------------|-------------|------------|------------|--------------|----------|------------|----------|---------------------------|
| Screening to | | | Ld | y Min | istry i | Kole | | |
| be | | | | | | | | |
| completed | | | | | | | | |
| ↓ ↓ | | | | | | | | |
| • | Children & | Special | Vulnerable | Aged Care | Parish | Lay | Paid Lay | Diocesan |
| | Youth | Religious | Adult | Facility | Council/ | Minister's | Church | Representative |
| | (General) | Education | | Pastoral | Warden | Licence | Worker | on Boards & Committees |
| | | in Schools | | Visitor | | | | Committees |
| SMC | | | | | | | | |
| Questionnaire | V | V | V | V | | V | V | |
| Synergy | | / | | | | | | |
| Accredited | Recommended | ✓ | | | | | | |
| Leader (SAL) | | | | | | | | |
| NSW | / | / | | | | / | / | |
| Working with | V | V | | | | V | V | |
| Children Check | | | | | | | | |
| (WWCC) | | | | | | | | |
| ACT | / | / | 1 | | | / | / | |
| Working with | ✓ | ✓ | ✓ | | | ✓ | ✓ | |
| Vulnerable | | | | | | | | |
| People Check | | | | | | | | |
| (WWVP) | | | | | | | | |
| AFP | | | | 1 | | / | | |
| Background | | | | \checkmark | | √ | ✓ | |
| Check | | | | , | | | | |
| Parish | | | | | / | | | |
| Leadership | | | | | ✓ | | | |
| Statutory | | | | | | | | |
| Declaration | | | | | | | | |
| National | | | | | | | | |
| Register Check | | | | | | V | V | |
| National | | | | | | | | |
| Professional | | | | | | ✓ | ✓ | |
| Standards | | | | | | | | |
| Clearance | | | | | | | | |
| Statutory | | | | | | | | / |
| Declaration for | | | | | | | | V |
| Diocesan Reps. | | | | | | | | |
| on Boards & | | | | | | | | |
| Committees | | | 1 | | 1 | | Ī | |

CHARACTER REFERENCE

To be completed by applicants who <u>have not been</u> a member of this Ministry Unit for more than 3 years.

| REFEREES | Please supply the name , addresses (postal and email) and phone numbers of three referees over the age of 18 years who are able to give a report of your good character and suitability for a ministry position. If you have lived in another state or country, please include a referee from your last parish or placement in that state and/or country. |
|---|---|
| Referee 1 Senior Church Leader – e.g. rector, church warden | |
| Referee 2 Employer or teacher (or person who has known you longer than 3 years, if no work or recent education history) | |
| Referee 3 Person who has known you longer than 3 years and knows you well | |

RECORD OF CHRISTIAN CHURCH MEMBERSHIP

DECLARATION - TO BE COMPLETED BY ALL APPLICANTS

To be completed by applicants who HAVE NOT BEEN a member of this Ministry Unit for more than 3 years.

List any church organisations, churches, parishes or congregations (including your current one) of which you have been a member in the last 5 years. Add additional pages, if required.

| Church | Any position held | Location | Rector/ Vicar/ P-I-C | Start Date | End Date |
|--------|-------------------|----------|-------------------------|---------------|-------------|
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| of, | | | | |
|-------------|---|--|--|--|
| Do solem | nnly and sincerely declare that: | | | |
| (1) | The information I have provided in this application and the information contained in any documents accompanying this application and signed by me are true and correct to the best of my knowledge and belief. | | | |
| (2) | I have received and read a copy of the current edition of the Diocesan Code of Good Practice of the Anglican Diocese of Canberra & Goulburn and Safe Communities of Faith Policy and I agree to adhere to and implement these documents, including attending a Creating Safe Ministries workshop and Refresher sessions. | | | |
| (3) | I understand that any material misstatement in or omission from this questionnaire may render me unfit to hold a particular office or any office in the Church. | | | |
| (4) | There is nothing in my background that I have not disclosed in this application, which if it becomes public knowledge could adversely affect the assessment of my good fame and character. | | | |
| (5) | If anything declared in this questionnaire changes, I will notify my Rector/Priest-in-charge/Ministry Coordinator immediately. | | | |
| (6) | I consent to the Safe Communities Unit collecting, using and disclosing personal information as described in the Privacy Statement (on page 1). | | | |
| (7) | I give my permission to share relevant unrestricted information ³ with a Diocesan agency ⁴ with a valid reason ⁵ for requiring the information. | | | |
| Signature | e: | | | |
| Declared | d at: Day of20 | | | |
| Before m | ne ⁶ : | | | |
| Title/Offic | ce held: | | | |
| Signature | e: | | | |
| or applica | ants 16 years and under a counter-signature from either a parent or guardian is required. | | | |
| | Guardian: | | | |
| Signature |) : | | | |
| Date: | | | | |
| N | NOTE: This Screening Questionnaire remains valid for 3 years, unless circumstances change. | | | |
| 000- | | | | |

Processed by SCU

Received by SCU

³ Relevant Unrestricted Information means: a cleared AFP Background Check, a National Register Check or a National Professional Standards Clearance, which means there are no disclosable outcomes present

⁴ A **Diocesan Agency** means an agency established by ordinance or by Bishop-in-Council to carry out functions of this Church in the Diocese but does not include a ministry unit. This includes but is not limited to Anglicare Departments.

⁵ A valid reason for requiring information would include screening as part of due diligence for an appointment or employment.

⁶ The Declaration may be witnessed by your Rector or other suitable person. Contact SCU on 6232 3610 for list.