



# ANGLICAN CHURCH OF AUSTRALIA

<INSERT NAME OF DIOCESE, PARISH OR CHURCH ORGANISATION>

## SAFE MINISTRY CHECK

*[Adopted by General Synod October 2004 & revised July 2005]*

### APPLICANT'S SCREENING QUESTIONNAIRE FOR VOLUNTARY CHURCH WORKERS

#### CONFIDENTIAL APPLICATION FOR MINISTRY

#### PERSONAL DETAILS:

Title: \_\_\_\_\_

Surname: \_\_\_\_\_

Christian Names: \_\_\_\_\_

Previous Names: \_\_\_\_\_ Male/Female

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone No: \_\_\_\_\_ Work Phone No: \_\_\_\_\_

Mobile Phone No: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Occupation: \_\_\_\_\_

Drivers Licence number: \_\_\_\_\_ expiry date \_\_\_\_\_ type: \_\_\_\_\_

(a copy of a current driver's photo licence issued within Australia must be provided)

or Other Identification: \_\_\_\_\_

(a copy of a birth certificate, a current Australian passport, an Australian citizenship document or Australian immigration papers, a current credit card or account card from an Australian financial institution, OR a current student identity card from an educational institution must be provided)

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## **Applicant's Screening Questionnaire For Voluntary Church Worker**

The Anglican Church of Australia has established standards of conduct for voluntary church workers to maintain a safe and healthy ministry environment. Our commitment to these standards requires that we conduct background referencing for all persons who intend to engage in voluntary ministry having direct and regular involvement with children and young people (0 to 18 years) in Australia.

This request for information is being made to comply with Anglican Church of Australia policies, and not because we have any reason to believe that any applicant has in fact engaged in inappropriate conduct. What follows is our Screening Questionnaire for those who intend to engage in voluntary ministry having direct and regular involvement with children and young people in Australia.

*This Screening Questionnaire is to be retained by <INSERT NAME OF THE PARISH OR CHURCH ORGANISATION> in a secure place. Except as may be required by law, or by church disciplinary procedures, the information you supply will be used only for screening and disciplinary purposes. Where required by law, the information you supply will be produced.*

You must answer all questions. You should add any additional information under the question or on a separate page. Please note that a yes answer will not necessarily result in your application being unsuccessful.

**We do not interpret a yes answer to a question as an admission of misconduct. Each Diocese in Australia provides a formal process for making such a charge.**

Thank you for your time.

Yours

<INSERT NAME>

Please return this Questionnaire to:

<INSERT NAME AND ADDRESS>

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### APPLICANT'S SCREENING QUESTIONNAIRE FOR VOLUNTARY CHURCH WORKERS

Please tick either "yes" or "no" for each question. If the answer to any of the following questions is "yes", please give details. A yes answer will not automatically rule an applicant out of selection.

1. Do you have any health problem(s), which may affect your work with children or young people?  
**Yes**  **No**
2. Have you ever been convicted of a criminal offence?  
**Yes**  **No**
3. Have you ever been charged with a criminal offence?  
**Yes**  **No**
4. Have you ever had permission to undertake paid or voluntary work with children refused, suspended or withdrawn in Australia or any other country?  
**Yes**  **No**
5. Have you ever engaged in any of the following conduct, even though never having been charged?
  - sexual contact with a parishioner, client, patient, student, employee or subordinate (other than with your spouse)
  - 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 or young person, or to put them at risk of harm.**Yes**  **No**
6. Has your driver's licence ever been revoked or suspended?  
**Yes**  **No**
7. 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**
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**

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9. Have you done anything in the past or present that may result in allegations being made against you of child abuse?

**Yes**  **No**

Child abuse means:

- bullying;
- emotional abuse;
- harassment;
- neglect;
- physical abuse; or
- sexual abuse.

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**

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## RECORD OF CHRISTIAN CHURCH MEMBERSHIP

List all church organisations, churches, parishes or congregations of which you have been a member.

Church	Position	Location	Senior Minister	Date From Month/Year	Date To Month/Year

### AUTHORITY TO PROVIDE INFORMATION AND RELEASE FROM LIABILITY OF REFEREES AND OTHERS AND CONSENT TO CRIMINAL HISTORY CHECK AND/OR CHILDREN'S COMMISSION CHECK

I understand that it is the policy of the Anglican Church of Australia to ask my referees:

whether to the best of their knowledge I have engaged in specified conduct that is relevant to the assessment of whether I am a suitable person for to undertake ministry in the Church.

I have identified all church organisations, churches, parishes or congregations of which I have been a member. I hereby authorise you and your delegates to contact and exchange information with them. I further hereby authorise every one of them to inform you and your delegates of any knowledge they may have relevant to the assessment of whether I am a suitable person for to undertake ministry in the Church.

I hereby authorise my referees to provide any information relevant to my application to you and your delegates.

I hereby release from liability any person or organisation that provides such information. I also agree to release you and your delegates from any and all liability as it relates to any investigation by you or them regarding the information contained in this application, or any action by you or them as a result of such investigation.

I hereby consent to provide an Australian Federal Police Check if I have resided in another country. I also consent to provide a <INSERT CRIMINAL HISTORY CHECK OR CHILDREN'S COMMISSION CHECK>.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

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**STATUTORY 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 and 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.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Declared at: \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 2 \_\_\_\_\_

Signature: \_\_\_\_\_

WITNESS TO THE APPLICANT'S SIGNATURE

Name of Witness: \_\_\_\_\_

Address of Witness: \_\_\_\_\_

Title / Office held: \_\_\_\_\_

**For applicants 16 years and under a counter-signature from either a parent or guardian is required.**

To the best of my knowledge, the information in this application form is correct.

Signed

Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

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**CHARACTER REFERENCE**

**Please provide two (2) 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 among children and young people. Referees will be contacted by telephone. They must NOT be a relative or a close friend. 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** (*Church leader e.g. rector, church warden, parish councillor, youth minister*)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

State: \_\_\_\_\_ Country: \_\_\_\_\_ Postcode: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ (work) \_\_\_\_\_

**REFEREE 2** (*Employer or teacher if no work history or adult person who has known you for longer than 3 years and knows you well*)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

State: \_\_\_\_\_ Country: \_\_\_\_\_ Postcode: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ (work) \_\_\_\_\_