



# Adult Helper Application (Non-Uniform)

FORM  
**A2**  
Mar 2016

**INSTRUCTIONS**

1. This application is to be used for Support Committee Members and regular Adult Helper.
2. The Applicant will complete all of this form, including the declarations and consents and forward to the Group Leader and Leader-In-Charge.
3. The Group Leader/Leader-In-Charge will sign and endorse the form with the details of the desired appointment and send to their Supervising Commissioner, who will sign and forward it to the Region Office.

**BLOCK LETTERS PLEASE**

**PERSONAL DETAILS**

Title (e.g.Dr,Mr,Mrs) \_\_\_\_\_ Family Name \_\_\_\_\_

First Given Name \_\_\_\_\_ Other Given Names \_\_\_\_\_ Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_  M  F Preferred First Name (if different to First Given Name) \_\_\_\_\_

Maiden or Former Names (if any) \_\_\_\_\_ Religion/Denomination \_\_\_\_\_

Nationality \_\_\_\_\_ Marital Status \_\_\_\_\_ Partner's Name (optional) \_\_\_\_\_

Occupation \_\_\_\_\_ Drivers Licence No. \_\_\_\_\_ State of Issue \_\_\_\_\_

Skills/Hobbies \_\_\_\_\_

Address \_\_\_\_\_ Town/Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Mobile ( ) \_\_\_\_\_ Home Fax ( ) \_\_\_\_\_

Work Phone ( ) \_\_\_\_\_ Email \_\_\_\_\_

Postal Address (if different)

Address \_\_\_\_\_ Town/Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

**BLOCK LETTERS PLEASE**

**PREVIOUS SERVICE AS AN ADULT MEMBER OF THE SCOUT MOVEMENT**

**INCLUDING INVOLVEMENT WITH SCOUTS AUSTRALIA NSW, INTERSTATE SERVICE AND/OR OVERSEAS SERVICE**

Please attach a copy of your interstate or overseas service and training history		Previous Membership No. (if known)	
State/Country	Appointment	Formation	Dates (From - To)

**WORKING WITH CHILDREN CHECK**

Please provide your current Working With Children Check Number.

Working With Children Check Number	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">W</td> <td style="width: 20px; text-align: center;">W</td> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;"> </td> <td style="width: 20px; text-align: center;"> </td> <td style="width: 20px; text-align: center;"> </td> <td style="width: 20px; text-align: center;"> </td> <td style="width: 20px; text-align: center;"> </td> <td style="width: 20px; text-align: center;"> </td> </tr> </table>	W	W	C	0							Expiry Date _____
W	W	C	0									

*Note: The above WWCC status will be verified by Scouts online.*

**OFFICE USE ONLY**

Police Clearance Date	WWCC Verification	Code of Conduct signed	Data Processing	Membership No. <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>								

Scouts Australia NSW	Level 1, Quad 3, 102 Bennelong Parkway, Sydney Olympic Park, NSW 2127	P O Box 125 Lidcombe, NSW 1825	Ph: 02 9735 9000 Fax: 02 9735 9001 E-mail: info@nsw.scouts.com.au
----------------------	---	-----------------------------------	---

## PARTICIPATION CRITERIA

I nominate the above named person for appointment as an Adult Helper in The Scout Association of Australia, New South Wales, The nomination is supported by two referees named below **who have been contacted by me and the applicant is accepted by me as a person of suitable repute.**

### NOMINATION FOR DESIRED APPOINTMENT

On receipt of a cleared Police Records Check, I recommend the above named person for appointment.

Appointment \_\_\_\_\_

(e.g. Chairperson, Secretary, Treasurer, Group Administration Officer or Adult Helper [Regular Helper])

Formation \_\_\_\_\_

Region \_\_\_\_\_

(e.g. 1st Haberfield Cub Scout Pack "Koala")

### FORMATION ENDORSEMENT

Signature of Leader-in-  
Charge of Formation \_\_\_\_\_

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

Date \_\_\_\_\_

### REGION ENDORSEMENT

Signature of supervising  
Commissioner /Leader \_\_\_\_\_

Appointment \_\_\_\_\_

Date \_\_\_\_\_

Signature of Region  
Office Manager \_\_\_\_\_

Date \_\_\_\_\_

***Only those subscribing to the undermentioned Consents and Declaration shall be entitled to appointment as an Adult Helper in The Scout Association of Australia, New South Wales Branch.***

### DECLARATION BY APPLICANT

I hereby apply for Adult Membership of the Scout Association of Australia, New South Wales Branch and to the above position.

#### **i) Past Service**

I have listed all my previous service as an Adult Member of the Scout Movement as required on page 1 of this form.

#### **ii) Consent For Referees Check**

I authorise the Scout Association to make any enquiries it sees fit as to my character, background, and suitability. Names and addresses of two responsible citizens, other than relatives or members of the Scout Association, to whom I am personally known, and of whom enquiries may be made are:

#### **Referees:**

1.Name \_\_\_\_\_

Address \_\_\_\_\_

Phone No. ( ) \_\_\_\_\_

2.Name \_\_\_\_\_

Address \_\_\_\_\_

Phone No. ( ) \_\_\_\_\_

### iii) Consent For Police Records Check

I authorise the Scout Association to undertake a check of Police records on a random and ongoing basis for purpose of disclosure of any conviction that may be recorded against me by a Court of Law. Also, for the furnishing of details concerning any matter that may be before such a Court but not yet finalised. The purpose for which such authorisation is given relates to my membership of The Scout Association of Australia, New South Wales Branch.

### iv) Privacy Consent

I have received a copy of, or am aware of, the Scouts NSW Privacy Policy, which also contains its Photographic, Images and Digital Media policy, and I consent to the information collected on this form and through Scouting activities to be used in accordance with the rights and obligations set out in that policy. Also, I acknowledge that any third party, about whom information on this form has been provided by me, has been informed of the Association's collection of their information and that they are aware of the Scouts NSW Privacy Policy. A copy of the policy is available from our website [www.nsw.scouts.com.au](http://www.nsw.scouts.com.au).

### v) Code of Conduct for Adults in Scouting

Compliance with the Code of Conduct expected of all adults, members and Associates, uniformed and non-uniformed, who work within the Movement, recognising that at all times they should act responsibly and exercise a Duty of Care.

### vi) Agreement and Authority

I agree to accept the Scout Promise and Law and be guided by the Policies and Rules of the Association and Scouts Australia NSW Branch.

I agree and undertake that if directed by the appropriate Commissioner at any time, to cease activities with the Association I will immediately comply with such direction without question.

I agree that if at any time I cease to hold a Working With Children Check clearance, my appointment will be immediately suspended.

I agree to return funds, property and records belonging to any part of the Scout Association, when I cease to perform the functions for which I was appointed, or when called upon to do so by my Commissioner, Region Association or by State Office. I further agree to abide by the Policies, Rules and Regulations now in force, or which may be issued by the authority of The Scout Association of Australia, New South Wales.

### **Matters which may adversely affect my character or the reputation of Scouts**

I have reviewed this document in detail, as well as the policies referred to in it, and am satisfied that I understand them. I accept the Code of Conduct as outlined. In addition, I make the following declarations in support of my application:

Have you ever been found guilty of an offence of any sexual nature committed in Australia or another country?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you ever been charged, reported, or defended in a court of law any allegation of sexual abuse, assault or a sexual offence of any kind in Australia or in another country?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you ever been (or are you currently) subject to any restrictions regarding your contact with children in any employment, volunteer or personal capacity?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you ever been dismissed or resigned as a volunteer or employee (or reported by any authority) for improper conduct relating to children in any jurisdiction?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you been named as the defendant in an Intervention Order, Apprehended Violence Order or Domestic Violence Restraining Order, or equivalent, in any jurisdiction?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

If you answered "yes" to any of the questions above, please submit a detailed summary of the circumstances surrounding the situation with your application. This should include dates and, where applicable, the reasons for the decision, conditions of employment, offence type and date, the court in which the matter was heard, and the status of any proceedings.

You commit to advise Scouts Australia NSW within 72 hours if you are ever approached by the authorities in relation to any allegation made against you of improper conduct relating to children, assault, or any sexual offence by you or if you are required to attend Court in respect of allegations that you have committed any other offence, whilst you are a member

Scouts Australia NSW reserves the unfettered right to accept or reject your application per its Child Protection Policy.

Signed by Applicant X \_\_\_\_\_ Date \_\_\_\_\_

### CODE OF CONDUCT FOR ADULTS

This Code of Conduct is expected of all adults, members and Associates, uniformed and non-uniformed, who work within the Movement, recognising that at all times they should act responsibly and exercise a Duty of Care.

1. Adults in Scouting respect the dignity of themselves and others.
2. Adults in Scouting demonstrate a high degree of individual responsibility, recognising that at all times their words and actions are an example to other members of the Movement.
3. Adults in Scouting act at all times in accordance with Scouting Principles, thereby setting a suitable example for all.
4. Adults in Scouting do not use the Movement to promote their own beliefs, behaviours or practices where these are not compatible with Scouting Principles.
5. Adults in Scouting act with consideration and good judgement in all interpersonal relationships both inside and outside Scouting.
6. Adults in Scouting respect everyone's right to personal privacy at all times. They take special care where sleeping, changing of clothing, bathing and ablutions are associated with any Scouting activity.
7. Adults in Scouting avoid unaccompanied and unobserved activities with youth members wherever possible.
8. Adults in Scouting, for their own protection, should avoid potentially compromising situations by ensuring, where reasonably possible, that at least two adults are in attendance whilst supervising and/or accompanying youth members. It is recognised that in certain circumstances, it may be necessary for a leader or adult, whilst acting responsibly and exercising their Duty of Care, to be alone with a youth member.
9. Adults in Scouting are committed to providing a safe environment for youth members participating in the Scout Program, their parents or guardians and visitors.  
That safe environment must be in accordance with Scouts Australia's policy of zero tolerance towards bullying, neglect, emotional, physical or sexual abuse of any kind.  
Adults in Scouting recognise that abuse can take many forms and can be perpetrated through various mediums, including through technology, and will be alert to abuse in all of its manifestations.
10. Adults in Scouting must report any conduct seen or heard that does not comply with this Code of Conduct. Specifically, Adults in Scouting must report promptly any suspicion or allegation of child abuse of youth members in their care. Where mandatory reporting is required, incident reports must be made to the police or designated State/Territory Authority in accordance with State or Territory Law and the nominated Scouting person should be advised. In all other cases the incident must be reported to the nominated Scouting person who shall report any suspicion or allegation of child abuse to the appropriate authority.

I have read, understood and will abide by the Code of Conduct.

Signed by Applicant X \_\_\_\_\_ Date \_\_\_\_\_