



# Safe Ministry Screening Questionnaire

For anyone aged under 18 serving as a volunteer or a junior volunteer/helper.

Please Note: This is a **sensitive** document that must be stored in a confidential manner accessible only by a limited number of authorised persons.

## PERSONAL DETAILS

Surname: .....

Given Names:.....

Previous Names (if applicable) .....

Date of Birth: ...../...../..... Gender: : .....

Mobile Phone: :..... Other Phone.....

Address: .....

Email: .....

Please outline any health conditions that may impact your volunteer role?

.....  
 .....

Name of at least one Parent/Guardian: .....

Contact Phone for Parent/Guardian: .....

Please circle either “YES” or “NO” for each of the following questions. If the answer to any of the following questions is “yes”, please give details on a separate page or discuss with the Senior Pastor or the person holding an equivalent leadership role in your church.

A ‘yes’ answer **will not** automatically rule an applicant out of selection. Please note that, if you disclose any potentially criminal actions, the church may need to report this information to the police or other relevant government authorities.

1. Have you ever been charged with or convicted of a criminal offence?	Yes / No
2. Have you a history of alcohol abuse or a history of substance abuse including prescription, over-the-counter, recreational or illegal drugs?	Yes / No
3. To your knowledge, has there ever been any allegations made against you regarding any abuse of a child, physical abuse or sexual misconduct?	Yes / No

## CHURCHES YOU HAVE ATTENDED REGULARLY IN THE PAST 3 YEARS

Name of church	Location	When (Month/Year)	Any positions held

## REFEREES

Please provide details of two referees who are over eighteen years of age and able to give a verbal report on your character and suitability for ministry. Referees may be part of the Church.

**Referee 1**

Name: .....Phone: .....

**Referee 2**

Name: .....Phone: .....

**CONSENT TO HOLD INFORMATION**

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

**DECLARATION**

I,..... sincerely declare that:

- The information I have provided in this application is true and correct to the best of my knowledge and belief.
- I understand that if I provide false or misleading information or withhold relevant information from this questionnaire, the church leadership may determine that I am unsuitable to serve in any role in the church.
- I have received a copy of the *Code of Conduct* and am willing to uphold it.

**APPLICANT’S SIGNATURE:** .....Date: .....

**PARENT GUARDIAN SIGNATURE**

Name of parent/guardian: .....

Signature: .....Date:.....

**Church Use Only**

Parental Consent obtained (name): _____	On (date): _____
WWVP number (16/17 yo in ACT)_____	On (date): _____
CSS Training undertaken (for 16/17 yo in non-junior roles):	On (date): _____
Interview led by: (name) _____	On (date):_____
Referee Checks conducted by: (name) _____	On (date):_____
Senior Leadership Endorsement (name) _____	On (date):_____
Entered onto Safe Church Register: (name) _____	On (date):_____
Induction led by (name) _____	On (date):_____

*\*Volunteers must be endorsed by a member of pastoral staff, governance group or Safe Church Team*

*Full records of the above processes (including interview notes, referee checks and induction content) should be kept in the relevant individual’s personnel file.*