



CONFIDENTIAL VOLUNTEER REGISTRATION FORM Digital Trainer

PERSONAL DETAILS			
Title	Mr / Mrs / Miss / Ms		
First Name		Middle Name	
Surname		Date of Birth	
Address			
Suburb		Postcode	
Phone		Mobile	
Email			
Language/s			

I agree to allow my email address to be shared with other volunteers for the purpose of exchanging shifts Y /N

EMERGENCY CONTACT			
Name		Relationship	
Phone		Mobile	

RELEVANT INFORMATION			
Do you have a Police Clearance?	YES / NO		
Notice No		Expiry Date	
Special skills, talents, hobbies you would like to offer as a Volunteer:			
Do you wear a medical alert bracelet?	YES / NO		If yes to either of these questions, please complete the 'Management Plan for Pre-existing Health Issue or Medical Condition' form
Do you have a disability, health issue or medical condition which may affect the type of work you do as a volunteer?	YES / NO		

Please circle which day(s) and time you would be able to assist at the library:

Preferred day: Monday / Tuesday / Wednesday / Thursday / Friday / Saturday

Preferred time(s) :

VOLUNTEER SCOPE OF DUTIES

Activity Description

1. **TITLE:** Digital Trainer
2. **DEPARTMENT:** Library Services
3. **KEY OBJECTIVE OF POSITION**
 - To assist the South Perth community by providing digital literacy training to community members
4. **OUTCOMES FOR THE POSITION**
 - Meeting the technological needs of library members in a dynamic online environment.
 - To operate as part of a team of library volunteers providing assistance in acquiring skills and knowledge.
5. **VOLUNTEER RESPONSIBILITIES**
 - Confirm the Duty of Care requirements ensuring their own safety and that of others through the prevention of any adverse acts or omissions.
 - Comply with the safety procedures and directions agreed between management, employee and volunteers or elected Safety and Health representatives.
 - Report all, including potential, hazards and accidents/incidents to their supervisor or OSH representative.
 - Not act outside the scope of their duties when volunteering on behalf of the City of South Perth.
 - Not wilfully interfere with or misuse items, equipment or facilities provided in the interests of City employees, the public and volunteers.
 - Take all reasonable measures to ensure that the personal information is protected against loss, unauthorised use, modification, disclosure or other misuse.
 - Display respect for the diversity and individuality of all people.
 - Conform to a smart casual dress code.
6. **KEY DUTIES/RESPONSIBILITIES**
 - Conduct personal one to one or small group digital training sessions within the library.
 - Assess the effectiveness of each session by finishing with a questionnaire or survey.
7. **PROFESSIONAL DEVELOPMENT**
 - Ongoing, volunteers are encouraged to be proactive in acquiring information, updates and trends in the information industry.
8. **RESPONSIBLE TO:**
 - Library Volunteer Services Officer
9. **SELECTION CRITERIA**
 - Well-developed verbal interpersonal, communication and teaching skills.
 - Well-developed information technology skills.
 - A current West Australian Police Clearance.
 - A commitment to voluntary work.
 - Punctual and reliable, with the ability to be contacted for reasonable scheduling changes.

Signed Department Manager: _____ Date: _____



CITY OF SOUTH PERTH & VOLUNTEER AGREEMENT

City of South Perth agrees to the following:

1. To provide information, training and support appropriate to each volunteer position.
2. To provide feedback on the work performance of volunteers.
3. To respect the skills, dignity and individual needs of volunteers and make every effort to ensure satisfaction and mutual respect as an equal partner in the workplace.
4. To accept constructive feedback and suggestions from our volunteers, that may benefit the volunteer programme and our supporting of the community.
5. To keep personal records pertaining to volunteers in a secure area and only forward information to relevant supervisors and staff within the City of South Perth.
6. To provide appropriate public Liability and personal accident insurance cover to City of South Perth volunteers in accordance with the extent of cover and policy requirements specified by the City of South Perth Insurer.

Signature of Volunteer Supervisor _____ **Date** _____

Name: Linda Roberts **Title:** Library Volunteer Services Officer **Department:** Library Services

As a Volunteer, I agree to the following:

1. To carry out the tasks assigned to me as a volunteer by my volunteer supervisor to the best of my ability and to only perform tasks within the scope of my duties as authorised by my volunteer supervisor and not to be impaired by alcohol or drugs.
2. To carry out my duties with a non-judgemental attitude towards others of different age, gender and cultural origin.
3. To offer my services on the understanding that no financial remuneration outside of authorised expenses will be received in return for them.
4. To provide a total of 3 forms of identification, including a photograph.
5. To allow my volunteer supervisor to conduct a Police Clearance check on me.
6. I authorise the City of South Perth to use my photograph for displays and promotional material. I am aware due to bulk printing it may be used for several years.

Signature of Volunteer _____ **Date** _____

Name of Volunteer: _____