



VOLUNTEER APPLICATION FORM

Personal Details

Date _____ Male Female (tick box)

First name _____ Surname _____

Address _____

D.O.B. _____ (volunteers must be 16 years or older)

Phone (home) _____ Phone (work) _____

Mobile no. _____ Email _____

Have you previously applied to be a volunteer at Channel 44? Yes No

Have you previously volunteered at Channel 44? Yes No

Do you have a valid driver's license? (if so give details) Yes No

License no. _____ Licence type/class _____

Emergency Contact

First name _____ Surname _____

Phone (home) _____ Phone (work) _____

Mobile _____ Relationship to you _____

Employment Details

Current employer (if applicable) _____

Occupation (if applicable) _____

Would your volunteer work count for work experience placement? Yes No

Volunteer work may count towards work experience placement for media students, if agreed to by your course provider. Students must be studying media related courses at a tertiary level; we cannot consider secondary school work experience placements at the present time.

Place of Education (if applicable)

School / College / University _____

Name of course / Year level _____

Availability

Days available each week (tick relevant boxes): *

Mon Tue Wed Thu Fri

* contact hours are 9.30am - 5.00pm (unless otherwise agreed)

Proposed start/end dates or ongoing (based on volunteer 1 day per week):

From _____ Until _____ or ongoing?

Skills and Interests

Why would you like to volunteer with us? _____

Do you have relevant experience or skills? (provide details) _____

Are you computer literate? (if so, provide details) _____

In which roles which you like to be considered for? (tick relevant boxes)

- | | | | |
|--|---|---------------------------------------|--|
| <input type="checkbox"/> Broadcast | <input type="checkbox"/> Administration | <input type="checkbox"/> Social Media | <input type="checkbox"/> On Air Presenting * |
| <input type="checkbox"/> Video Editing | <input type="checkbox"/> Previewing | <input type="checkbox"/> Marketing | <input type="checkbox"/> Producing * |
| <input type="checkbox"/> Programming | <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Sales | <input type="checkbox"/> Camera * |
| <input type="checkbox"/> Web Dev. | <input type="checkbox"/> Web
Maintenance | <input type="checkbox"/> Reception | <input type="checkbox"/> Audio * |

* This role is offered to volunteers who also work in one or more of the other roles listed above, we do not accept volunteers interested only in production

Declaration

I declare that I am aged 16 years or above and that the information given on this form is true and correct. I understand that all information provided will remain confidential.

Signature _____ **Date** _____

Please email your completed form, together with your CV/resume, to:
contact@c44.com.au

OR mail to:
Channel 44 Adelaide
c/o ABC Collinswood
Level 7, 85 North East Rd
Collinswood SA 5081

Office Use Only:
Processed By: [] _____

- Channel 44 inducted ABC Personnel Site Induction signed