

OF ARMIDALE

CCD Office - Armidale

TO BE COMPLETED FOR EACH NEW APPLICANT & UPON RENEWAL OF WWC CLEARANCE



Original: To be held in Parish

Copies: 1 copy to be held by SRE Teacher/Assistant

1 copy forwarded to Diocesan CCD Office

PARISH SPECIAL RELIGIOUS EDUCATION (SRE) VOLUNTEER ENGAGEMENT & AUTHORISATION FORM

	TITLE	FIRST NAME	LAST NAME
RESPONSIBLE TO *AUTHORISING PE	RSON		
PARISH OR DEANERY OR DIOCESE	BY NAME AND SUE	BURB	
SCHOOL(S) YOU WILL BE ATTENDING	G		
CONTACT DETAILS			
Address			
		Postcod	e
Email			

GENERAL CONDITIONS

I agree to carry out my tasks as an SRE volunteer (Teacher/Assistant) in accordance with the principles and values of the Catholic Church, Diocese of Armidale. I undertake to exercise due care for the safety and behaviour of students when teaching or supervising them. I acknowledge that the teaching given to the students in the SRE classroom shall at all times be of the highest quality possible.

No remuneration is to be paid to me as a volunteer SRE Teacher. Out of pocket expenses may be reimbursed by prior arrangement with my *authorising person.

VOLUNTEER CATECHIST / SRE TEACHER TASKS

- To deepen my union with Christ and the Church
- To cooperate with SRE authorities in both schools and church (Parish Priest, Parish delegate, Diocesan CCD Coordinator)
- To read/understand the SRE Code of Conduct (available at the Parish Office or Online under the SRE Section on the Armidale Diocesan Website)
- To attend Child Protection training and updates as required
- To complete the training appropriate to this ministry within 12 months
- To undertake to teach SRE from the curriculum authorised or recommended by the Bishop
- To display my Photo ID Authorisation Card when attending SRE Lessons and events at a Public School.
- To prepare lessons well and to attend classes regularly and punctually
- · To maintain a record of all lessons presented

Phone 02 6772 4971

Fax 02 57015140

VOLUNTEER STATEMENT

- a. I acknowledge that the Catholic Church, Diocese of Armidale has special responsibilities to the students, their parents / carers and to the school authorities because of the opportunities given to the Catholic Church to instruct students in Special Religious Education.
- I agree to carry out those tasks in accordance with the general conditions set out above and any special b. conditions set out below.
- I wish to volunteer my services on the above basis to the Catholic Church, Diocese of Armidale, C. and I acknowledge I am responsible to the "authorising person" of the parish who has responsibility for the school(s) in which I teach.
- d. I have read and understood the Diocesan SRE Code of Conduct.
- I understand that should I fail to meet my commitments as set out above I could be asked to withdraw e. from the ministry of SRE in government schools.
- f. If there are any changes in regard to the above, I will notify my Parish Priest or the Diocesan SRE Coordinator

g.	I will seek to develop relationships of mutual support and assistance with others who share in the ministry of Catechesis in my Parish.		
h.	My Working with Children Check Number is W W C		
i.	Expiry date for my Working with Children Check Number//		
j.	My date of birth is/		
k.	I have completed my Child Protection training on:/		
DE	ECLARATION		
l ha	ave never been convicted of any criminal offence which involves:		
•	An act of violence towards another person		
	Sexual assault		

- Any offence against a minor person
- Provision of prohibited drugs
- Child pornography

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Signature of SRE Teacher/Assistant_	Date_//

(Parish Priest) DECLARATION OF EMPLOYER / AUTHORISING PERSON

*Authorising Person is the leader of the church at the level you seek to serve or represent i.e. in the Parish it is the Parish Priest I have verified that this person is cleared to work with children as a volunteer according to the NSW Office of Children's Guardian Website I have sighted a photo identification for this person (applicable for New SRE Teacher / Applicants Form of identification used: Position: Name: _____ Date ____/ ___/ __ Signature of Authorising Person ____

PRIVACY STATEMENT

The Diocese of Armidale acknowledges and respects the privacy of individuals. Any information provided on this form is to verify your WWCC number, record training/course attendance, enable us to provide you with details of the training courses and to inform you of future ministry activities. It will not be used for any other purposes. You will need to advise us if, at any time, you no longer want your details on our database

CCD Office use only	
Verification Date:	Verified by:
