



# Multicultural Council of the Northern Territory Inc.

Shop 15, Malak Centre, Malak Place, NT 0812.

PO Box 299, Karama, NT 0813.

Telephone: (08) 8945 9122

Facsimile: (08) 8945 9155

Email: [admin@mcnt.org.au](mailto:admin@mcnt.org.au)

Website: [www.mcnt.org.au](http://www.mcnt.org.au)

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## MCNT Volunteer Application Form

The information collected in this form will help us become familiar with you and your interests.  
The information is kept on file for our records only.

Family names: \_\_\_\_\_

Given names: \_\_\_\_\_ Female / Male

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email address: \_\_\_\_\_

Age group (please circle): under 18    19-24    25-34    35-44    45-54    55-64    65+

Date of birth: \_\_\_\_\_ Country of birth: \_\_\_\_\_

Languages spoken: \_\_\_\_\_

Are you currently (please circle): In paid employment?    Full time    part time

Retired    Student    Unemployed    Home duties    other

Do you have your own car and a current driver's license?    Yes / No

**Availability:** once a month    once a fortnight    once a week    irregularly

School holidays    weekends    evenings    daytime

What days of the week are you available:    Monday    Tuesday    Wednesday

Thursday    Friday    Weekends

Experience and skills: \_\_\_\_\_

Hobbies and interests: \_\_\_\_\_  
\_\_\_\_\_

Reason for seeking volunteer work with the MCNT: \_\_\_\_\_  
\_\_\_\_\_

Do you have any disability/medical condition that might affect your ability to do certain types of work?

Yes/No \_\_\_\_\_

If you are on Work Cover please detail. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there any reason why you would be unsuited to some areas of volunteer work? \_\_\_\_\_  
\_\_\_\_\_

How did you find out about MCNT volunteer programs? \_\_\_\_\_  
\_\_\_\_\_

Do you have an Ochre Card (A Working with Children requirement for N.T) Yes / No

If No (*above*), do you agree to undergo a criminal history check? Yes / No

Signed: \_\_\_\_\_

Date: \_\_\_\_\_