

## FRIENDS OF PHILIP STREET - VOLUNTEER ROLE DETAILS

<b>Role Title:</b>	Community Gardener
<b>Location:</b>	Philip Street Communities and Families Precinct

## WHAT IS THE ROLE?

The Friends of Philip Street *Community Gardener* will work as part of a team undertaking different gardening activities including weed removal and control, seedling propagation, watering and harvesting. Your ideas and suggestions will be important and valued. You may also be asked to work with community groups and not-for-profit groups in the community garden

## WHAT WILL I DO?

As a *Community Gardener* you will learn and share gardening skills and join in the growth of a community led garden that grows fruit and vegetables to harvest for community. Fruit and vegetables will be shared and given to anyone in the community who needs fresh locally grown produce.

## WORKPLACE HEALTH & SAFETY (WH&S)

- Perform all work and associated functions in a safe manner that will not cause endangerment to self, other employees, volunteers or members of the public
- Comply with all documented WH&S policies, procedures, work instructions and verbal instructions issued by any authorised persons
- Correctly and consistently use and maintain all personal protective clothing and equipment supplied by Council
- Identify hazards, conduct risk assessments, and take corrective action to eliminate hazards in the workplace, where possible, and/or report hazards and risks in accordance with WH&S procedures
- Establish and maintain a high standard of housekeeping and cleanliness within individual work areas and on Council property generally
- Report and assist with the investigation of all incidents within the workplace, including injuries, near misses and property damage
- Be familiar with the location of first aid treatment centres, fire protection facilities and evacuation procedures; and
- Report workplace health and safety concerns to the Supervisor.

## ARE YOU:

Are you:

- Friendly, polite and approachable
- Able to build and maintain connections with community and between service providers
- Empathetic, respectful and inclusive
- Motivated to uphold the values of the precinct
- Able to find your own means of transport to and from the work site
- Able to work in an outdoor gardening environment
- Able to meet the physical requirements to safely perform gardening work (will be assessed and restrictions on some tasks may apply based on individual's physical capacity)
- Able to donate time to volunteer
- Able to attend Volunteer team meetings or specific training supplied by Council.

Do you:

- Embrace diversity

- Always display a professional and friendly manner
- Consider volunteering across other Council gardening projects
- Have a current Blue Card to work with children or able to acquire one? (this is arranged through Council at no cost to you)

### VOLUNTEER ACKNOWLEDGEMENT:

By signing this form, I confirm that I will comply with all Workplace Health & Safety conditions of this role and, for my own personal safety, will advise of any medical or pre-existing injuries before commencement.

<b>Volunteer Name:</b>			
<b>Volunteer Signature:</b>		<b>Date:</b>	
<b>Blue Card working with children number:</b>		<b>Expiry Date:</b>	

### APPLICANT DETAILS:

<b>First Name:</b>	<b>Surname:</b>		
<b>Date of Birth:</b>	<b>Gender:</b>		
<b>Address:</b>			
<b>Home Phone:</b>	<b>Work Phone:</b>	<b>Mobile:</b>	
<b>Email:</b>			

### EMERGENCY CONTACT DETAILS:

*(We will only use the Emergency Contact in the event of an emergency)*

<b>First Name:</b>	<b>Surname:</b>		
<b>Home Phone:</b>	<b>Work Phone:</b>	<b>Mobile:</b>	
<b>Relationship to You:</b>			

### AVAILABILITY:

*(Please mark all that apply and indicate any preferences)*

<b>On a regular day each week:</b>
<b>During school holidays:</b>
<b>For specific events/projects:</b>

### SKILLS:

**What skills, experience, or qualifications can you offer to the community via the Friends of Philip Street volunteer group?**


How would you describe your skill level?

**CURRENT CERTIFICATES:**

*(If "Yes", please provide an expiry date for that certificate)*

Queensland driver's license:      Y / N      Expiry date:

First Aid certificate:      Y / N      Expiry date:

CPR certificate: Y / N      Expiry date:

Working with Children Blue Card:      Y / N      Expiry date:

**HOW DID YOU HEAR ABOUT THE FRIENDS OF PHILIP STREET:**

*(Please mark all that apply)*

Gladstone Regional Council Website / Social Media - Facebook, Twitter :

Word of Mouth:

Family/Friend:

Other:

**PREVIOUS WORK EXPERIENCE:**

*(Please include paid and/or voluntary work)*

Gladstone Regional Council conducts reference checks for Philip Street volunteers, please provide two references:

Name of Individual or Organisation	Position Held	Description of duties performed	Period of Work

Friends of Philip Street Volunteers must obtain a current working with children Blue Card. Do you have a current Working with Children Blue Card?

Yes: Signature \_\_\_\_\_ Number \_\_\_\_\_ Exp date: \_\_\_\_\_

No: I need to obtain an application form \_\_\_\_\_ Signature: \_\_\_\_\_

I acknowledge and I understand I am not able to Volunteer without a current Working with Children Blue card.

Signature: \_\_\_\_\_

#### VOLUNTEER CODE OF CONDUCT AGREEMENT:

I agree to work as a volunteer for the Philip Street Communities and Families Precinct and I understand that I must comply with the Code of Conduct of Gladstone Regional Council. I will wear the volunteer shirt provided. YES / NO

I understand that I may seek guidance and advice from the Neighbourhood Centre Coordinator and Gladstone Regional Council staff YES / NO

I will treat people with respect and dignity regardless of age, gender, religion, affiliation, sexual orientation and/or personal circumstance. YES / NO

I understand that any act of verbal, emotional, or other physical abuse or harassment is unacceptable and will be treated seriously in accordance with Gladstone Regional Council rules of conduct. YES / NO

I will not disclose any personal information of clients or visitors to the Philip Street Communities and Families Precinct which I may obtain through my volunteering service at the Precinct. YES / NO

I understand that I am not authorised to offer my personal views or opinions as official advice on behalf of Gladstone Regional Council or other Service Providers located within the Precinct. YES / NO

I will follow the safety requirements and procedures of the Precinct. YES / NO

#### APPLICANTS AGREEMENT:

*(All volunteers are required to adhere to all Gladstone Regional Council policies)*

By signing this form, I confirm that the above information is true and correct to the best of my knowledge and does not contain misleading or incorrect information at the time of signing this declaration. I also confirm I have read and understood the attached Role Description Form.

Printed Name:

Signature:

Date:

**Collection Statement:** The Gladstone Regional Council is collecting the personal information provided above for the purpose of processing this form. This personal information may be accessed and used by authorized employees of Council. This personal information will not be used for any other purpose without your permission, unless authorized or required by law.

#### AUTHORISATION:

Approved By:

Date:

Further details contact: Community & Neighbourhood Centre (07) 4976 6300

Please return application via the below methods. **Attention: Neighbourhood Centre**

Email: [communities@gladstone.qld.gov.au](mailto:communities@gladstone.qld.gov.au)

Drop in: Philip Street Communities and Families Precinct  
Community & Neighbourhood Centre (Ngallil – Green Building)  
1 Pengelly Street, West Gladstone QLD 4680