



## EXPRESSION OF INTEREST FOR PARENTS – YEAR 6 CAMP Date: 19th to 21st February 2018

Camp Policy: Appendix 4  
(Updated 3<sup>rd</sup> March 2017)

The following application details need to be completed by parent/volunteer helpers as part of the process of selecting helpers to attend and assist with a school camp. Parent/Volunteer helpers will need to complete a *DET Working With Children Check*. Parent/Volunteer helpers chosen are expected to accept a share of responsibilities for the group as a whole and will be required to sign a confidentiality statement in accordance with the Privacy Act and a Child Safe Code of Conduct.

### Anticipated Duties:

1. Supervision 24 hours a day, including travelling to and from
2. Assist staff in the running of activities at the camp as directed by the coordinator / camp staff
3. Assist duty groups to complete tasks efficiently

Attendance and participation of parent/volunteer helpers at this camp must be approved by School Council. The list of interested parent/volunteer helpers will be submitted to Council. Upon approval, the successful parent/volunteer helpers will be informed in writing. Parent/volunteer helpers will be selected on a needs basis.

Parent/Volunteer Helper's Name \_\_\_\_\_

Child's Class \_\_\_\_\_

### PLEASE COMPLETE

Previous school camps / tours experience \_\_\_\_\_

\_\_\_\_\_

Have you a current 'Working With Children Check'? \_\_\_\_\_

Have you a current First Aid Certificate or nursing training? \_\_\_\_\_

Any leadership /involvement in youth groups? Please list: \_\_\_\_\_

\_\_\_\_\_

Any comment relevant to your application: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Referee: \_\_\_\_\_

Referee Phone: \_\_\_\_\_

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

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_

Please return this expression of interest to school by \_\_\_\_\_  
Staff members appreciate your willingness to help us in the activity.