



SAFE CHURCH Church Worker Summary 2025

Personal Details

Parish:			
Title:		Surname:	
Given Names:			
Previous Names:			
Address:			
Home Phone:		Work Phone:	
Mobile Phone:		Email:	
Date of Birth:		Occupation:	
Emergency Contact Name		Telephone/ Mobile:	

Appointed or Elected or Voluntary Role/s:

Role	Clearance Level

Proof of Identity

<i>(Identity document/s <u>must</u> be confirmed as sighted by parish priest or other authorised person, however, certified copies are <u>not</u> required of documents submitted for the purposes of identification.)</i>					
Australian Passport Number:		Expiry Date:		ExpiryDate:	
OR					
Driver's Licence Number:		Expiry Date:		Type:	
OR					
Other Form of Identification:		Document Reference or Number:			
(Birth certificate, an Australian citizenship document or Australian immigration papers, a current credit card or account card from an Australian financial institution or a current student identity card from an educational institution.)					

Clearance Documents

<i>If required, please complete as per your level of clearance requirement</i>			
Working with Children Check or Teacher Registration			
State of Issue:		Card Number:	
Name on Card:		Expiry Date:	
National Police Check			
Name on Check:			
Document number:		Date of Issue:	

I have sighted the document/s listed and am satisfied as to the identity and the validity of the clearance documents (where required) of the person named above and of there .

Name of verifier*:

Signature of verifier:

*To be signed by the authorised parish representative who has sighted the identity documents



General Code of Conduct

We all have the right to feel safe, to be safe and to be treated with respect and fairness at all times.

I will:

- Treat people, regardless of age, gender, race or religion, with respect and honesty
- Listen to what others have to say
- Not abuse or bully anyone else or use inappropriate language
- Respect the right of other people to privacy
- Not disclose personal information that I may become aware of through formal or informal involvement in the church
- Be responsible in my use of alcohol and other mind altering or addictive substances or services
- Respect the authority and responsibility of leadership
- Ask questions and ask for help if needed
- Report to the appropriate authority if I become aware that a child or vulnerable person is suffering abuse or I have reason to believe someone is at risk of abuse
- Report any concerning behaviour, unwanted attention or behaviour that makes me feel anxious or uncomfortable
- Take responsibility for my own safety and for the safety of vulnerable others around me

Church Worker Declaration

I, _____, of the Parish of _____ do solemnly and sincerely affirm that I have read and understood the General Code of Conduct for the Diocese of Wangaratta (which has been provided to me), and that I will at all times seek to uphold the codes of behaviour applicable to me as a church worker.

I understand that I will be immediately suspended from any and all roles I hold in the Diocese of Wangaratta should I breach the codes, pending a Professional Standards review.

APPLICANT'S SIGNATURE

Date: _____

Signature: _____

Parish Endorsement

I, _____, priest/authorised representative* of the Parish of _____ affirm that to the best of my knowledge _____ is a person of good character.

I confirm that they have been provided with a copy of the General Code of Conduct.

SIGNATURE OF PRIEST OR AUTHORISED REPRESENTATIVE

Date: _____

Signature: _____

*An authorised representative for the purposes of parish endorsement on this form might be the parish priest, Parish Safe Church Officer, Parish Council Secretary, or other appropriate person. Where it is unclear who is appropriate, Parish Council should consider this and make a determination. The authorised representative should not be someone who is related to the person completing the Church Worker Summary.

WHAT TO DO WITH COMPLETED FORM?

1. GIVE A COPY TO THE APPLICANT
2. KEEP A COPY SECURELY ON FILE (*hard or electronic*)
3. ADD/UPDATE DETAILS FOR EACH PERSON ON THE PARISH SAFE CHURCH REGISTER OF OFFICE BEARERS / VOLUNTEERS
4. PLEASE SEND COMPLETED CWS FORM Via POST or EMAIL PDF SCAN TO

Post: Safe Church Office,
Bishop's Registry,
PO Box 457,
Wanagaratta, Victoria, 3676

Email: safechurch@wangaratta-anglican.org.au