

**St Dympna's Primary School
491 Robinson Road Aspley Q 4034**

Volunteer Student Protection Information Sign off
Original of completed sign off sheet to be retained by school

Iconfirm that I have been given the volunteer student protection hand book and that I understand my reporting responsibilities as a volunteer.

Volunteer's signature.....Date.....

Principal's signature.....Date.....



School Volunteer Register Form

Surname: _____ First Name: _____
Date of Birth: _____ Contact Number: _____
Address: _____
City/Suburb: _____ Postcode: _____

Volunteer Position held: _____

Date Mandatory Student Protection In-servicing received: _____

(Volunteers other than parents of enrolled students)

Positive Notice Blue Card Registration Number: _____ Expiry Date: _____

NB: A copy of the current Blue Card or Exemption Card must be attached to this form

Important Information:

I understand that I must follow the schools visitor procedures and sign in and out at the front desk on all occasions.

I have been provided with a copy of:

- Brisbane Catholic Education's *Statement of Principles*
- The *Volunteer Code of Conduct*
- The *Student Protection Handbook for Volunteers*

I, _____, have read, understood and accepted the above.
(Your first name and surname)

Signed: _____ Date: _____