

Section D: Details of Child-Related Work

(This section MUST be completed IF you are engaged or intend to be engaged in child-related work)

11. List the area(s) of child-related work in which you work or volunteer, or intend to work or volunteer.

Refer to section H on the back page of this Application Form for code numbers. Please indicate ALL code/s that apply and whether you will be a volunteer or an employee (or both).

1st Code No.	70	▶ Volunteer	X Employee	2nd Code No.	▶ Volunteer	Employee
3rd Code No.		▶ Volunteer	Employee	4th Code No.	▶ Volunteer	Employee

NOTE: 'Child-related work' has a specific meaning (see section 1 of the Guide).

Application Form Number **03469051**

Section E: Details of Organisation/s (This section MUST be completed)

NOTE: The organisation/s you list, may receive enquiries from the Department of Justice for the purpose of assessing your application, will be advised if you withdraw your application and will be sent a copy of any WWC Check Card or Notice you are given. You must notify the Department within 21 days of any change of organisation details, penalties apply for failure to do so. You can do this online at <https://online.justice.vic.gov.au/wwccu>, or by calling 1300 652 879.


12. Who will you be working/volunteering with? Read the options carefully and select ONE.

I WILL be doing child-related work for the following organisations:

I DO NOT currently work or volunteer in child-related work or have an offer to do so.

Note: Fill in details of every organisation that:

- employs you, or
- you volunteer for, or
- you have a firm offer from, or
- acts as your agent - for child-related work.

 DO NOT fill in organisation details. Now turn over the page, read (but do not sign) Section F, and complete (but do not sign) your Application Receipt.

DO NOT list organisations you have applied to that have not made you a firm offer.

Please complete the organisation details below and complete all fields including state, postcode and phone number. You MUST also complete Question 11 on the previous page.

Name of primary Organisation (include department/section)

MELBOURNE FOOTBALL CLUB

Postal Address PO BOX 254

Suburb/Locality

EAST MELBOURNE

State

VIC

Postcode

8002

Employer/Volunteer organisation contact phone number

0396521137

Name of other Organisation (include department/section)

Postal Address

Suburb/Locality

State

Postcode

Employer/Volunteer organisation contact phone number