

To be completed by all those applying for a Bishop's licence or seeking re-licensing. This includes student candidates, clergy entering the Diocese, locums and lay workers.

Personal Details

| | | | | | | |
|-----------------------|----|----------------|-------|----------------|----|---|
| Title: | | Gender: | M / F | Date of Birth: | / | / |
| Surname: | | | | | | |
| Christian names: | | | | | | |
| Marital Status: | | Previous name: | | | | |
| Address: | | | | | | |
| Phone: | H: | | W: | | M: | |
| Email: | | | | | | |
| Position applied for: | | | | | | |
| Parish: | | | | | | |

Working with Children Check

Check No:

Exp Date:

Safe Ministry Training

Trained at

Exp Date:

Completing the form

1. Before completing this document you should read Faithfulness in Service, which includes the code of conduct for safe ministry to children. You can find Faithfulness in Service on the Diocesan website at

<http://www.armidaleanglicandiocese.com>

2. The Safe Ministry Check takes the form of a Statutory Declaration. It is a criminal offence to make a Statutory Declaration knowing it to be untrue in any material way.

Consent & Commitment

The Diocese of Armidale has established standards of conduct for clergy and lay church workers to maintain a safe and healthy ministry environment. We acknowledge that this is to be understood first from the Scriptures, and then as it is expressed in various diocesan ordinances, protocols and in our code of conduct, *Faithfulness in Service*.

- I consent to the information contained in this application and any subsequent pages being collected and held by the Diocesan Office.
- I consent to all background checks and referee checks as necessary for my role, including a Federal Police Background Check, Anglican National Register Check, and National Professional Standards Clearance.
- I understand that this information will be treated as confidential and used only for screening and disciplinary purposes.

Name: _____

Signature: _____ Date: _____

Please submit a scanned copy of this document to assistant@armidaleanglicandiocese.com or post to:

Safe Ministry
Anglican Diocese of Armidale
PO Box 198
ARMIDALE NSW 2350

| Please tick either "YES" or "NO" for each question. Where a YES answer is given it will not automatically rule an applicant out of selection. In these situations the application will be referred for risk assessments before an appointment can be made / licence issued. Wherever a YES answer is given, you are to provide relevant information regarding your response on a separate paper and indicate the current status, of the issue, if any. | YES | NO |
|---|-----|----|
| 1. Have you ever been refused a Bishop's licence (in any Diocese in Australia or Overseas)? | | |
| 2. Have you done anything that is likely to affect adversely your reputation and character or that might affect your fitness to hold a licence or authority from the Bishop? | | |
| 3. Have you ever been investigated by the police or any government authority, charged with and/or convicted of a criminal offence and/or has any civil suit been brought against you (or is any such pending)? | | |
| 4. Has disciplinary action of any sort ever been sort against you, by a licensing board, employer, educational institution, church or church body, or are there any complaints pending against you that did not result in discipline, or are there complaints pending? | | |
| 5. Have you ever been asked to cease volunteer work, resign or had your employment terminated by any voluntary association, training program, employer, church or any other body? | | |
| 6. Have you ever had permission to undertake paid or voluntary work with children, young people or vulnerable adults refused, suspended or withdrawn in Australia or any other country? | | |
| 7. Have you ever had an accreditation to work with Children refused, suspended or withdrawn in Australia or any other country? | | |
| 8. Has a child or dependent young person or vulnerable adult in you care (as a parent or in any other capacity) ever been removed from your care, or been the subject of a risk assessment by the authorities? | | |

| | | |
|---|--|--|
| <p>9. Have you ever engaged in any of the following conduct, even though never having been charged?</p> <ul style="list-style-type: none"> • sexual contact with <i>someone under your care</i> other than your spouse (such as a parishioner, client, patient, student, employee or subordinate) • sexual contact with a person under the age of consent • illegal use, production, sale or distribution of pornographic materials • conduct likely to cause sexual harm to another person, or to put them at risk of sexual harm. | | |
| <p>10. Have you ever engaged in sexual conduct with a person who could not consent to this conduct (underage i.e. 16 years or person of diminished/ limited capacity)?</p> | | |
| <p>11. Have you ever been unfaithful in marriage?</p> | | |
| <p>12. Has your sexual behaviour in the past, or is it now, characterised by a lack of sexual purity or integrity? This includes but is not limited to the use / viewing of pornographic materials (adult or child exploitation materials)?</p> | | |
| <p>13. To your knowledge, have you ever been the subject of an allegation of sexual abuse or sexual misconduct?</p> | | |
| <p>14. Have you done anything in the past or present that may result in allegations being made against you of child abuse? Child abuse means: bullying; emotional abuse; harassment; neglect; physical abuse; or sexual abuse?</p> | | |
| <p>15. Have you done anything in the past or present that may result in allegations being made against you of bullying or any form of harassment of adults?</p> | | |
| <p>16. Have you ever been the subject of a complaint about a breach of confidentiality?</p> | | |
| <p>17. Have you ever had an order made against you or entered into a composition with creditors or an assignment for the benefit of creditors under the "Bankruptcy Act" or have you ever had an order made against you under the "Corporations Act"?</p> | | |
| <p>18. Do you have a history of alcohol abuse, gambling, or a history of substance abuse including recreational or illegal drugs and misuse of prescription, over-the-counter medications?</p> | | |
| <p>19. Since your conversion, have you ever participated in any occult practice?</p> | | |
| <p>20. Has your driver's licence ever been revoked or suspended?</p> | | |
| <p>21. Have you ever been charged with a traffic offence which required you to attend court?</p> | | |
| <p>22. Have you ever been charged with any offence related to cruelty to animals?</p> | | |
| <p>23. Have you ever had a licence to own firearms refused or revoked?</p> | | |
| <p>24. Have you ever had an Apprehended Violence Order, order for protection or the like issued against you as a result of allegations of violence, abuse, likely harm, harassment, stalking, etc?</p> | | |

| | | |
|--|--|--|
| 25. Have you any other health or medical conditions that may hinder you in the diligent fulfilment of your office? | | |
|--|--|--|

Interstate/International residence

Have you ever resided or worked in any other Australian State or Territory or any other country?

Yes Please fill in details in table below No

| STATE/TERRITORY OR COUNTRY | ADDRESS | DATES |
|----------------------------|---------|-------|
| | | |
| | | |
| | | |
| | | |

Record of Licences (where applicable)

| POSITION | DIOCESE | BISHOP | START DATE | END DATE |
|----------|---------|--------|------------|----------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Record of Christian Church Membership

List any other church organisations, churches, or congregations of which you have been a member in the last 10 years. Add additional pages, if required.

| CHURCH NAME | LOCATION | DURATION | POSITIONS HELD |
|-------------|----------|----------|----------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Character References

| | |
|---|---|
| | Please supply the name, addresses (postal and email) and phone numbers of 3 referees over the age of 18 years who are able to give a report of your good character and suitability for a ministry position. If you have lived in another state or country, please include a referee from your last parish or placement in that state and/or country. |
| Referee 1 <i>Senior Church Leader – e.g. Previous Bishop. Other church leader</i> | |
| Referee 2 <i>(Who has known you more than 2 years & knows you well)</i> | |
| Referee 3 <i>(Who has known you more than 2 years & knows you well)</i> | |

Statutory Declaration

I, _____

of _____

Do solemnly and sincerely declare that:

- (1) The information I have provided in this application and the information contained in any documents accompanying this application and signed by me are true and correct to the best of my knowledge and belief.
- (2) There is nothing in my background that I have not disclosed in this application, which if it becomes public knowledge could adversely affect the assessment of my good name and character.
- (3) If anything declared in this questionnaire changes, I will notify my Diocesan Bishop immediately.

Applicant's Signature: _____

Declared at: _____ This _____ Day of _____ 20 _____

Witness to the Applicant's Signature

Name of Witness: _____

Address of Witness _____

Title / Office Held _____

Your signature must be witnessed by a person (who is not required to read the document) authorised to witness a Statutory declaration.

Office Use Only:

| | <i>Date</i> | <i>By Whom</i> | <i>Comments</i> |
|------------------------------------|-------------|----------------|-------------------------|
| <i>Questionnaire received</i> | | | |
| <i>Questionnaire reviewed</i> | | | |
| <i>Working with Children Check</i> | | | <i>Cleared / Barred</i> |
| <i>References checked</i> | | | |
| <i>Recommended for approval</i> | | | |
| <i>Approved</i> | | | |