

## **KEDRON STATE HIGH SCHOOL**

## **Volunteer Declaration**

Volunteer's Name: (Please print clearly)

I confirm that whilst volunteering at Kedron State High School:

- I will maintain a valid (in date) Record of Completion of "Mandatory All-Staff Training (MAST) Program – Key messages guide for contractors, volunteers, visitors and preservice teachers and other adult students on placements" and present it to the teacher or staff member the first time I volunteer in that area and at other times when requested.
- If I am not the parent of a student currently enrolled at Kedron State High School, I will hold a current Blue Card and the card must be linked to this school
- I am not a restricted person, and should this change, I will immediately stop volunteering at Kedron State High School (you do not need to tell us why you are no longer able to volunteer). Further information on this, including penalties, is available from the Blue Card website: <u>https://www.publications.qld.gov.au/dataset/blue-card-system-</u> changes/resource/138ea044- 0a74-4b84-b25f-aab8a3d4b949
- I will sign the Visitors Register located in the Main Office each time I volunteer.

I am a parent of a student currently enrolled at Kedron State High School:		
Name of youngest student:	Class:	
OR		
I am not a parent of a student currently enrolled at Kedron State High School. I am:		
□ A relation/friend of a Kedron State High student		
□ A community member	uuent s hame)	

Volunteer's Signature: ...../..../.... Date: ..../..../....

Contact Phone No:

OFFICE USE ONLY:	Initials		
□ MAST Record of Completion sighted and in date (valid 12 months from date of issue)			
	Date: / /		
□ If not a parent of a student currently enrolled at Kedron State High School (see above section) original Blue Card sighted and linked to our school (Business Manager to confirm □ Blue Card Portal □ OneSchool) Please attach a copy of the Blue Card If yes, Expiry Date:	Yes / N/A		
□ Volunteer has completed and signed this statement			
□ Volunteer Confirmation given to volunteer	Date: / /2023		
Signature and date of Officer Issuing Volunteer Confirmation:			