

RENEWAL of AUTHORISATION – SRE Helpers

Name:		WWCC number:	
Date of Birth		Gender:	
Address:			
Town/Suburb:		Postcode:	
Telephone:		Mobile:	
Pastoral Charge:		Presbytery:	
Current Authorisation Expiry Date:			

GENERAL CONDITIONS

1. I agree to carry out my task as a Special Religious Education [SRE] helper in accordance with the principles and policies of the Presbyterian Church of Australia in the State of New South Wales and the guidelines of the NSW Department of Education and Communities. I undertake to exercise due care for the safety and behaviour of the students when teaching or supervising them.
2. I acknowledge that the Presbyterian Church of Australia in the State of New South Wales has special responsibilities to students, their parents and carers and to the school authorities because of the opportunities given to the Presbyterian Church of Australia in the State of New South Wales to instruct students in SRE.
3. I provide my services on the above basis to the Presbyterian Church of Australia in the State of New South Wales and I acknowledge that I am responsible to my authorising agent, that is the above pastoral charge.
4. I understand that my authorising agent can terminate my engagement if I fail to meet my commitments as set out on this form and I agree that upon termination I will promptly deliver my Authorisation Card to my authorising agent.
5. I agree that if any complaint of sexual misconduct is made against me, my authorising agent may suspend my engagement immediately until such time as the matter is resolved.
6. I agree that my name, address and phone number may be provided to PYNSW to enable them to provide me with relevant SRE information.
7. I agree that I will only act as an SRE Helper and that I will be under the direct supervision of an authorised SRE Teacher at all times when I am in a school.
8. I agree to carry out my task as an SRE Helper in accordance with the conditions of this form.

STATUTORY DECLARATION

I hereby do solemnly declare that:

- a) I do not have any criminal conviction which involves:
 - a crime against a child;
 - an act of violence towards another person;
 - sexual assault; or
 - provision of prohibited drugs.
- b) I understand that I must have a Working with Children Check clearance which will be verified by the Conduct Protocol Unit.
- c) I agree to the General Conditions as set out on this form.
- d) I have completed the SRE Accreditation Training as required by the Presbyterian Church of Australia in the State of New South Wales.
- e) I have completed the Breaking the Silence Basic Training or equivalent as required by the Presbyterian Church of Australia in the State of New South Wales.
- f) If I am charged with any crime referred to in a), I will promptly notify my authorising agent.

g) To my knowledge the information I have provided on this form is true and correct.

and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the *Oaths Act 1900*.

Declared at: _____ [place] on Date: ___ / ___ / _____

Applicant's Signature: _____ Date: ___ / ___ / _____

in the presence of an authorised witness, who states:

I, _____ [name of authorised witness]

a _____ [qualification of authorised witness]

certify the following matters concerning the making of this statutory declaration by the person who made it: [** please cross out any text that does not apply*]

1. *I saw the face of the person *OR* *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and

2. *I have known the person for at least 12 months *OR* *I have not known the person for at least 12 months, but I have confirmed the person's identity using an identification

document and the document I relied on was _____ [*describe identification document relied on*]

Witness: _____ Date: ___ / ___ / _____
(Justice of the Peace, Notary Public or Solicitor / Barrister)

PASTORAL CHARGE ENDORSEMENT

I endorse this application: _____ Date: ___ / ___ / _____
(Minister or Session Clerk or Session appointed SRE Coordinator)

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CHECKLIST

Please return the following to the CPU (Attn: Courtney Chan, PO Box 2196, Strawberry Hills, NSW, 2012)

- Renewal of Authorisation - SRE Helper Form (original copy)
- Working with Children Check number

Please complete and retain: SRE Helper Job Description – to be retained by the pastoral charge – found at www.breakingthesilence.org.au