**Catholic Archdiocese of Perth**

**Safeguarding Personal Decla****ration**

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| **\*\*\*\* Confidential \*\*\*\*** |
| **Church Worker****Employee** | ☐ Clergy/Religious | ☐ Seminarian | ☐ Paid | ☐ Unpaid/Volunteer |
| **Role/s** |  |
| Surname |  | First name/s |  |
| Name previously known by |  | Date of birth |  / / |
| Address |  |
| Email |  |
| Mobile Number |  | Phone Number |  |
| **Diocese/Religious Institute/Parish/Agency/Office Name** |  |
| **WA Working with Children Card No** (If applicable) |  | **Expiry Date** |  |
| **Other than the Parent or Child Volunteer Exemption, have you been denied a WA WWCC Card?** | ☐ Yes ☐ No |
| **National Police Clearance No** (If applicable) |  | **Issue Date** |  |
| **ACMR** Australian Catholic Ministry Register ID (If applicable) |  |
| **Please mark those statements that you are currently able to affirm unconditionally** * There are not currently any complaints of abuse against me
* I am not subject to any past substantiated complaint of abuse.
* There are no circumstances that could lead to a complaint of abuse against me.
* There are no other circumstances past or present that may lead to a conclusion that I pose a risk to children, young people or adults at risk.
* I have read, understood, and will comply with the Catholic Archdiocese of Perth [**Code of Conduct**](https://safeguarding.perthcatholic.org.au/wp-content/uploads/2024/07/Code-of-Conduct-Short-Form17-07-2024.pdf) that reflects the standard of the Church’s National Code – [**Integrity in Our Common Mission.**](https://safeguarding.perthcatholic.org.au/wp-content/uploads/2024/06/Integrity-in-our-Common-Mission-December-2023.pdf)
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| If you are unable to affirm any of these statements, please provide further details below and any relevant documentation. |
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| **VISITING CLERGY, RELIGIOUS & LAITY USE ONLY** (if applicable): |
| **Visitation Dates** | From: |  / / | To: |  / / |
| **Purpose of Visit** |  |
| **Visitation Location/Address** |  |
| **Non-WA WWCC No.** |  | **Expiry Date** |  |
| **Declaration** |
| The information provided is correct. I understand that, if it is found I have withheld information or included any false or misleading information, I may be removed from my position without notice. I understand that I may be subject to further checks. This information will be kept securely at the CAPAC, parish/agency, or Safeguarding Office. |
| **Sign** |  | **Date** |  |
| **Name** |  |
| **CLERGY/RELIGIOUS RETURN THIS FORM TO THE OFFICE OF THE VICAR GENERAL AND RETAIN A COPY.****CHURCH WORKERS (PAID AND UNPAID) RETURN THIS FORM TO THE PARISH/AGENCY/OFFICE.****SAFEGUARDING OFFICERS RETURN THIS FORM TO THE SAFEGUARDING OFFICE AND RETAIN A COPY.** |
| **Safeguarding Office: (08) 9221 7762** **Office of the Vicar General: (08) 6104 3600** | **Email:** **safeguarding@perthcatholic.org.au****Email:** **ea.vg@perthcatholic.org.au** |

