

CONFIDENTIAL STATUTORY DECLARATION

ANGLICAN DIOCESE OF SYDNEY

Application for Ordained Ministry, or appointment as a Paid, Licensed or Authorised Church Worker

Safe Ministry Check

Name of Applicant	
Role applied for	
Parish or organisation of the role applied for	

1 The Safe Ministry Check

To the Applicant

The Anglican Diocese of Sydney has established standards of conduct for clergy and church workers to maintain a safe and healthy ministry environment.

Our commitment to these standards requires that we conduct background referencing for all persons who intend to engage in ordained and lay ministry. This request for information is being made to comply with Anglican Diocese of Sydney policies, and not because we have any reason to believe that any applicant has in fact engaged in inappropriate conduct.

As part of our screening process, we request you to answer a series of questions which are, of necessity, intimate in nature

Completing the form

1.Clergy and church workers in the Diocese of Sydney are expected to be familiar with and to comply with the Faithfulness in Service Code of Conduct. Before completing this form please read Faithfulness in Service, which can be downloaded from the Safe Ministry website at: https://safeministry.org.au/faithfulness-in-service-code-of-conduct/

- 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.
- 3. Complete all sections.

Please tick either "Yes" or "No" for each guestion.

If the answer to any of the following questions is "yes", please indicate the question number, and provide relevant information regarding your response and indicate current status of the issue(s) in the footnote at the bottom of the page or on an additional sheet if more space is required. If you are not sure what is meant by a word or phrase in bold print, please consult the Key Terms in *Faithfulness in Service*.

Any disclosure will not automatically rule an applicant out of selection. Failure to make a full disclosure of matters which might affect your reputation and character as an ordained minister or a lay worker could result in church disciplinary action being taken against you if allegations or information come to light subsequent to your ordination or licensing. Disclosed conduct which could be child abuse or a serious sexual offence must be specifically considered by the Archbishop and his advisors under the *Ministry Standards Ordinance 2017*.

4. Sign your initials at the bottom of every page. At the end of the form sign the declaration and ensure that your signature is witnessed by a person authorised to witness a Statutory Declaration.

Submitting the form	Make sure you attach copies of the following documents: Photo identification (driver's licence or passport) Police check from State or Territory in Australia (other than NSW) (if applicable) Police check from overseas country (if applicable) Professional Standards References (if applicable) Please return this form along with the relevant enclosures at the time of your interview.
Privacy	This application is confidential. It will be kept secure in the confidential files of the Archbishop's office, in accordance with the <i>Privacy Act</i> . Except as may be required by law, or by church disciplinary procedures, the information you supply will be used only for screening and disciplinary purposes (except those paragraph's marked*). If required by law, the information you supply will be made available to the applicable authority.
Working with Children	Check
Number	Expiry Date / /

2 The Applicant Personal details ☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other, specify Title First name(s) Surname Date of birth (d/m/y) Gender □ male □ female Marital Status Date of Marriage Name of Spouse Current occupation **Current address** Number, Street Suburb/town, Postcode State, Country Previous address Have you ever resided or worked in any other Australian State or Territory, or in another country? Yes Please list all previous addresses, the most recent first. (Please attach an additional sheet if more space is required.) **Address** From (m/y) To (m/y) **Contact details** Home phone Work phone Mobile phone Email Previous Name/s Have you ever, since the age of eighteen, been known by any name(s) other than the one given above? Yes Please list previous name/s.

2.1 Interstate/	Intern	atio	nai Re	elocati	on				
a) Are you r Yes	noving [inters	state to	work in	the Diocese of Syd	ney?			
	oleted p	orior t	o the in				ne State or Territory fro check later, please fo		
b) Are you comi Yes		ustral Io	lia from	another	country in order to	work in the Di	ocese of Sydney?		
	is chec	k is c	omplete	ed prior	to the interview, ple		ederal police check froi you receive your check		
Please provide a	referen	ce co	ntact na	ame and	d email address for	an appropriate	Professional Standard	ds check.	
2.2 Record of	Ordir	atio	n/Con	secra	tion				
Have you ever be					a priest, or consected details below.	crated as a bisl	nop?		
		Die	ocese					Date	
Ordained as Dead	con								
Ordained as Pries	st								
Consecrated as B	Sishop								
2.3 Record of E									
(a) Have you pre	-				•	etails below. th	e most recent first.		
					e space is required				
Position				Dioc	ese	Bishop		From (m/y)	To (m/y)
<u> </u>									
(b) Have you ☐ No	ı ever r				e provide details be	low.	ce in the Diocese of Sy	dney or elsewhere	e?
						5			

2.4 Record of Christian Church Membership and Christian Ministry

Complete the table below regarding any church you have attended regularly during your adult life, excluding positions detailed above. List the most recent first.

(Please attach an additional sheet if more space is required.)

Role	Church/Organisation	Location	Rector/Supervisor	From (m/y)	To (m/y)

2.5 Record of past employment

Please provide your employment history below, with the most recent first. (Please attach an additional sheet if more space is required.)

Employer	Location	Position or Role	From (m/y)	To (m/y)

3 Screening Questions

Please answer the questions below by putting a cross [X] in the appropriate box.

If the answer to any of the following questions is "yes", please indicate the question number, and provide relevant information regarding your response and indicate current status of the issue(s) in the footnote at the bottom of the page or on an additional sheet if more space is required.

If you are not sure what is meant by a word or phrase in bold print, please consult the Key Terms in *Faithfulness in Service*.

General	I		
	ou done anything likely to adversely affect your reputation and character or that might affect ness to be ordained or to hold a licence or authority from the Archbishop?	□No	Yes
Health a	and Social Issues		
	have any health condition(s), which may affect your work with children, young persons, ble people or people generally?	□No	☐ Yes
	have a history of substance abuse including alcohol, prescription, over-the-counter, onal or illegal drugs or have you ever used any prohibited substance?	☐ No	☐ Yes
Have yo	ou ever used any prohibited drug or prohibited substance?	☐ No	☐ Yes
Do you h	have a history of problem gambling?	☐ No	☐ Yes
Have yo	ou ever participated in any occult practice?	☐ No	☐ Yes
Question	Note		
No.			

The Alcohol Use Disorders Identification Test: Self-Report Version

Please circle one box for each question that best describes your answer to each question

Question	0	1	2	3	4	Score
How often do you have a drink containing alcohol?	Never	Monthly or less	2-4 times a month	2-3 times a week	4 or more times a week	
2. How many drinks containing alcohol do you have on a typical day when you are drinking?	1 or 2	3 or 4	5 or 6	7 to 9	10 or more	
3. How often do you have six or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
5. How often during the last year have you failed to do what was normally expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
7. How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
8. How often during the last year have you been unable to remember what happened the night before because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
9. Have you or someone else been injured because of your drinking?	No		Yes, but not in the last year		Yes, during the last year	
10. Has a relative, friend, doctor or other health care worker been concerned about your drinking or suggested you cut down?	No		Yes, but not in the last year		Yes, during the last year	
Source: World Health Organisation, 1992					Total	

0

Crimina	al and Other Offences and Professional Misconduct		
		☐ No	☐ Yes
		☐ No	☐ Yes
Have yo	ou ever been charged* with any offence related to cruelty to animals?	☐ No	☐ Yes
Have yo	ou ever been charged* with a traffic offence which required you to attend court?	☐ No	☐ Yes
associa			
i.	Has disciplinary action of any sort ever been taken against you?	∐ No	☐ Yes
ii.	Have there been charges* or written complaints against you to the above named bodies that did not result in discipline?	□ No	☐ Yes
iii.	Are there charges* pending against you before any of the above named bodies?	☐ No	☐ Yes
iv.	Have you ever been asked to resign or cease volunteer work or had your employment terminated by any of the above named bodies?	□No	☐ Yes
		☐ No	☐ Yes
		☐ No	☐ Yes
•	·		Yes
Have yo	ou ever had a licence to own firearms refused or revoked?	∐ No	☐ Yes
		made to a co	urt,
uestion No.	Note		
	Have your criminal Have your parking Have your Have your associate body. i. iii. iv. Have your or is any Have your reason? Licence Has your Have your reason?	i. Have there been charges* or written complaints against you to the above named bodies that did not result in discipline? iii. Are there charges* pending against you before any of the above named bodies? iv. Have you ever been asked to resign or cease volunteer work or had your employment terminated by any of the above named bodies? Have you ever had a civil suit brought against you arising out of alleged professional misconduct, or is any such suit pending? Have you ever had professional indemnity insurance declined, suspended or revoked for any reason? Licences Has your licence to drive a motor vehicle ever been revoked or suspended? Have you ever had a licence to own firearms refused or revoked? Toughout this document "charged" indicates allegations made in writing and known to you or allegations olinary tribunal or employer in Australia or in any other Country.	Have you ever been charged* with a criminal offence? Getting a parking or speeding fine is not a criminal offence. Have you ever been convicted of a criminal offence in Australia or in any other country? Getting a parking or speeding fine is not a criminal offence. Have you ever been charged* with any offence related to cruelty to animals? No Have you ever been charged* with a traffic offence which required you to attend court? No This question relates to action before a licensing board, professional association, community association, sports club, employer, educational institution, training program, church or any other body. i. Has disciplinary action of any sort ever been taken against you? ii. Have there been charges* or written complaints against you to the above named bodies No that did not result in discipline? iii. Are there charges* pending against you before any of the above named bodies? No iv. Have you ever been asked to resign or cease volunteer work or had your employment terminated by any of the above named bodies? Have you ever had a civil suit brought against you arising out of alleged professional misconduct, or is any such suit pending? Have you ever had professional indemnity insurance declined, suspended or revoked for any reason? Licences Has your licence to drive a motor vehicle ever been revoked or suspended? No Have you ever had a licence to own firearms refused or revoked? No Have you ever had a licence to own firearms refused or revoked? No

3.5	Financial Matters		
a)	Have you ever been charged* with misappropriating funds, or otherwise breaching fiduciary duties in any capacity?	□No	☐ Yes
b)	Have you ever been charged* with an offence under the taxation laws?	☐ No	☐ Yes
c)	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 any Act regulating corporations?	☐ No	☐ Yes
d)	Have you ever been accused of or investigated for suspected misappropriation or mishandling of funds?	☐ No	☐ Yes
3.6	Child Protection		
a)	Is there any behaviour or experience in your past or present that may result in allegations being made against you of abuse in relation to children or young persons under 18 years? Child abuse' means:	□No	☐ Yes
	 the following conduct in relation to a child: bullying; emotional abuse; harassment; neglect; physical abuse; sexual abuse; spiritual abuse; grooming; or the failure without reasonable excuse to comply with the laws of the Commonwealth, a State or Territory requiring the reporting of child abuse to the police or other authority; or the possession, production or distribution of child exploitation material. 		
	The context of the conduct includes personally, virtually or by any electronic means.		
b)	So far as you are aware, have you ever been the subject of an investigation concerning your care of children or young persons, or your behaviour towards or in the presence of children or young persons by the Police, a child protection authority or any other proper authority?	□No	Yes
c)	Has a child or dependent young person in your 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?	☐ No	☐ Yes
d)	Have you ever had permission to undertake paid or voluntary work with children refused, suspended or withdrawn in Australia or any other country?	☐ No	☐ Yes
e)	Have you ever been charged* with the production, sale or distribution of, or illegal access to child exploitation material?	☐ No	☐ Yes
f)	Have you ever possessed, accessed, published or viewed child exploitation material?	☐ No	☐ Yes
	T		
Q	uestion Note No.		

a)		ou ever had an apprehended violence order, order for protection or the like issued against a result of allegations of violence, abuse, likely harm, harassment or stalking?	□No	Yes
b)	Have yo	ou ever been charged * with verbal or physical harassment?	☐ No	☐ Yes
c)	or with *Dome	ou ever engaged in domestic abuse*, bullying, verbal abuse or violence within your family others? estic abuse' means: Conduct in relation to a person in your family or an intimate partner and includes: onal, verbal, social, economic, psychological, spiritual, physical and sexual abuse.	□ No	☐ Yes
	Abuse	more extensive definition of these terms refer to Appendix 1 of the Anglican Diocese of Sydnes: Policy and Good Practice Guidelines which can be found at		

3.7 Abusive Conduct

The sexual contact with a parishioner, client, patient, student, employee or subordinate (other than with your spouse) Sexual contact with a person under the age of consent Sexual contact with a person under the age of consent

sexual contact with a person under the age of consent illegal use, production, sale or distribution of child exploitation material conduct likely to cause harm to a child or young person, or to put them at risk of harm. Have you been involved in any homosexual activity or relationship? □No ☐ Yes g) □No ☐ Yes h) Have you been involved in sexual conduct outside of marriage? 3.9 Sexual Conduct and Misconduct – Pornography & Sexting Have you ever been involved with the production, sale or distribution of, or illegal access to ☐ No ☐ Yes a) pornographic materials? b) Have you ever viewed, read or listened to material, which would be judged pornographic by right □No ☐ Yes thinking members of the Church in this Diocese? This includes, but is not limited to, inappropriate participation in online forums and groups and through the use of social media platforms and apps. If you answered 'yes' to Q.3.9 (b), please complete the following, if you answered no to Q3.9(b) c) proceed to Q.3.9(d): i. When did you last access pornography? ii. On average how often have you viewed/accessed pornography: In the last 12 months? _ In the last 2 years? In the last 5 years? _____

Question No.	Note

What are your strategies for resisting/dealing with this issue?

iii.

☐ Yes

		ou ever sent sexually suggestive or explicit images of yourself to another person who is not ouse, or requested such images from another person or have you ever distributed* such	□No	Yes
	* distri	bute includes:		
		d, supply, exhibit, transmit or communicate to another person, or		
		ke available for viewing or access by another person,		
		r in person or by electronic, digital or any other means.		
e)	If you a person	inswered Yes to Q 3.8 (d) was the person you sent images to or requested images from a under the age of 18 years at the time?	☐ No	☐ Yes
Que				
N	No.	Note		
		Note		
N		Note		
N		Note		



4 Character References

Please provide details below of three (3) referees.

Referees must be over eighteen years of age and be able to give a report on your good character and suitability for ministry among children and young people. They must NOT be a relative or close friend. 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							
This person must be a	Title	Rev	☐ Mr	☐ Mrs	Miss	☐ Ms	Other, specify
Senior Church Leader e.g. rector, church warden,	First name						
elder	Surname						
	Number, Street						
	Suburb/Town, Postcode						
	First name Surname Number, Street Suburb/Town, Postcode State, Country Home phone Mobile phone Email Title Rev Mr Mrs Miss Ms Other, specify First name Surname Number, Street Suburb/Town, Postcode						
	Home phone			Mr Mrs Miss Ms Other, specify			
	Mobile phone						
	Email						
REFEREE 2		ı					
This person must be a current or former employer	Title	Rev	☐ Mr	☐ Mrs	Miss	☐ Ms	Other, specify
or, if you have no work	First name						
history, a current or former teacher.	Surname						
leacher.	Number, Street						
	Suburb/Town, Postcode						
	State, Country						
	Home phone						
	Mobile phone						
	Email						
REFEREE 3							
This person must be	Title	Rev	☐ Mr	☐ Mrs	Miss	☐Ms	Other, specify
someone who knows you well, having known you for	First name						
at least three years.	Surname						
	Number, Street						
	Suburb/Town, Postcode						
	State, Country						
	Home phone						
	Mobile phone						
	Email						

5 Statements

Authority for information

I understand that it is the policy of the Anglican Diocese of Sydney to ask:

- those who serve or have served as my bishop;
- churches I have regularly attended as an adult; and
- my employers;

whether to the best of their knowledge I have engaged in specified conduct that is relevant to the assessment of whether I am a suitable person to undertake ministry in the Church.

I have identified all positions in which I have held a bishop's licence or authority, all churches which I have regularly attended as an adult and my employers. I hereby authorise the Anglican Diocese of Sydney and its delegates to contact and exchange information with them.

I further hereby authorise every one of those bishops, churches and employers to inform the Anglican Diocese of Sydney and its delegates of any knowledge they may have relevant to the assessment of whether I am a suitable person for to undertake ministry in the Church.

I hereby authorise my referees to provide any information relevant to my application to you and your delegates.

Release from Liability

I hereby release from liability any person or organisation that provides information relevant to the assessment of my suitability to undertake ministry in the Church.

I also agree to release the Anglican Church Diocese of Sydney and its delegates from any and all liability as it relates to any investigation by them regarding the information contained in this application, or any action by them as a result of such investigation.

Acknowledgement

The information I have provided in this application including the previous pages initialled by me 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

I have received and read a copy of the current edition of the Faithfulness in Service Code of Conduct of the Anglican Church Diocese of Sydney; and I understand that the Code applies to all clergy and church workers;

I understand that I must apply for a Working With Children Check (WWCC) through the NSW Office of the Children's Guardian (http://www.kidsguardian.nsw.gov.au) and provide the WWCC clearance number and expiry date before commencing work in the Diocese of Sydney. I understand that it is illegal to undertake child-related work in NSW without obtaining a WWCC clearance and providing this to the Diocesan Registry in order for verification to take place.

I understand that any material misstatement in or omission from this questionnaire may render me unfit to hold a particular or any office in the Church or to remain in employment in a Church body.

Signature of applicant	
Name of applicant (print)	
Date	

6 Statutory Declaration					
	Please initial each page of the document. Your signature must be witnessed by a person authorised in this jurisdiction to witness a Statutory Declaration. The witness is not required to read the document.				
Declaration by applica	nt I,	(insert your full name)			
	of	(insert your full address)			
		ormation I have provided in this application and the inpanying this application are true and correct to the			
Signature of applicat	nt				
Declared a	at	Date			
Signature of Witnes	s				
Name of Witness (prin	t)				
Address of Witnes	s				
Title/Office he	d				
	To be completed by interviewer during i	interview			
The questions were discussed	l with the applicant by:				
Name (plea	se print)	_			
Position (plea	se print)	_			
/ / Date					

		OR		
The applicant was advised t	0:			
Signature of Interviewer				
ignature of Applicant				
hecklist:		North Market IV		
	iver's licence or passport	:) (copy attached) (other than NSW) (if applic	ahla – saa ∩ 39)	
Police check from over			able – See Q.33)	
		e - see (J 4())		
	seas country (if applicable			
Professional Standards			☐ ID not approved	
Professional Standards OFFICE USE ONLY	s References (if applicable	e – see Q.40)	☐ ID not approved	
Professional Standards OFFICE USE ONLY Office Use Only	s References (if applicable	e – see Q.40)		
Professional Standards OFFICE USE ONLY Office Use Only PSU Database	s References (if applicable	e – see Q.40)		
OFFICE USE ONLY Office Use Only PSU Database Date cleared Reviewed by PSU	s References (if applicable	□ ID approved National Register		
OFFICE USE ONLY Office Use Only PSU Database Date cleared Reviewed by PSU Signature	s References (if applicable	□ ID approved National Register Date cleared		
OFFICE USE ONLY Office Use Only PSU Database Date cleared Reviewed by PSU Signature	s References (if applicable	Date cleared Date		
OFFICE USE ONLY Office Use Only PSU Database Date cleared Reviewed by PSU Signature	s References (if applicable	Date cleared Date		
OFFICE USE ONLY Office Use Only PSU Database Date cleared Reviewed by PSU Signature	s References (if applicable	Date cleared Date		
☐ Professional Standards	s References (if applicable	Date cleared Date		