



Share your story – aged care volunteers

We want to hear about your experience volunteering in aged care.

The answers you provide may be shared on the department's channels (including but not limited to the website and social media platforms) to:

- highlight the contributions of volunteers to the lives of older people receiving aged care services, and
- inspire others to volunteer.

You may complete the below template with an electronic or handwritten response.

Grey areas are mandatory fields. **Asterisks (*)** are next to fields where information will not be published and is only required for confirmation of any details.

First name (or preferred name)	
Last name*	
Email*	
Phone*	
Which organisation/s do you volunteer with?	
What is your volunteer role?	

What do you do day-to-day in your volunteer role?	
How long have you been volunteering in aged care?	
How did you get into volunteering? What motivated you?	
What do you enjoy the most about volunteering?	
Would you recommend volunteering in aged care to other people, and if so, why?	
Do you have anything further you would like people to know about your experience? (up to 100 words)	

Submitting your image

To publish your story on the department's website and social media, we will need an image to bring your story to life.

Here is a checklist to help make sure you have everything ready to go.

Checklist – if it is only you in the image:

- ☐ I have signed a media consent form
- ☐ I have a clear jpeg image to submit

Checklist – if there are multiple people in the image:

- ☐ I have signed a media consent form
- ☐ I have a clear jpeg image to submit
- ☐ I have named everyone in the image (from left to right)
- ☐ I have a media consent form signed by each person featured in my image

Media consent form

You can complete the media consent form **on the next page** or [download it from our website](#)

What's next?

You must complete the relevant media consent forms and submit an image if you want your story to be published. You can send them in alongside this document to the aged care volunteer policy team via:

Email: agedcarevolunteer@health.gov.au

Post: Department of Health and Aged Care, Consumer Support Team Level 7 South, Sirius Building, GPO Box 9848, Canberra, ACT, 2601

We will contact you if we intend on publishing your story and give you an opportunity to review before it is published.

Thank you for your valuable contribution.



CONSENT FOR USE OF PHOTOGRAPHS, RECORDINGS, QUOTES AND TESTIMONIALS

The Department of Health and Aged Care (the 'Department') is tasked with providing information about health issues in the community, promoting public health messages, and publicising relevant Australian Government policies and programmes. As part of this communication role, the Department uses photos, digital images, video and audio recordings, quotes and testimonials in various publications, campaigns, advertising and on web sites.

The Department seeks your consent to use photos, digital images, or audio or video recordings taken of you or quotes or testimonials from you for use in these communication initiatives (the 'Agreed Purpose').

Acknowledgement and consent

I acknowledge that I:

- am over the age of 18 years OR I am the parent/guardian of a person who is under 18 years and have the legal authority to give consent;
- have read the contents of this form and know that I will receive a copy of it;
- understand the Agreed Purpose of publication of images or recordings of me, or quotes or testimonials from me, including possible use on the Internet;
- understand that the Department does not guarantee that any images, recordings, quotes or testimonials will necessarily be used;
- understand that copyright in the images or recordings, or documents containing the quotes or testimonials will vest in the Commonwealth of Australia;
- understand that I will not be given the original of the image or recording of me and may not be given the original document containing the quote or testimonial from me (if any);
- consent to the Department giving my image, recording, quote or testimonial to another Australian Government department or agency; and
- consent to the publication, by the Department, of images or recordings of me, or quotes or testimonials from me for the Agreed Purpose with any reasonable retouching or alteration (including extracts, cut-downs or stills).

Name: _____ Signed: _____

Date: ____/____/____ Phone no: _____

To enable us to reference your image in photographs if necessary, please provide a brief identifying description of you, such as hair colour, glasses, clothing type and colour.

☐ Please tick the box if you identify yourself as an Aboriginal or Torres Strait Islander

Note: The Department is required to comply with the Australian Privacy Principles under Schedule 1 of the Privacy Act 1988 when collecting personal information about you. Personal information includes photos and recordings. The Department can be contacted by telephone on (02) 6289 1555 or freecall 1800 020 103 or by using the online enquiries form at www.health.gov.au.

The Department has an APP privacy policy which you can read at <http://www.health.gov.au/internet/main/publishing.nsf/Content/privacy-policy>. You can obtain a copy of the APP privacy policy by contacting the Department using the contact details set out above. The APP privacy policy contains information about:

- How you may access the personal information the Department holds about you and how you can seek correction of it; and
- How you may complain about a breach of the Australian Privacy Principles.

The Department is unlikely to disclose your personal information to overseas recipients.

The Department of Health makes every effort to comply with the Guidelines for Federal and ACT Government World Wide Websites available at <http://www.oaic.gov.au/privacy/privacy-resources/privacy-guides/guidelines-for-federal-and-act-government-websites>. You should understand that personal information published on the Internet is accessible to anyone with access to the Internet, from anywhere in the world. While the contents of the Department's web site are protected by copyright, once information has been published on the Internet, the Department has no control over its subsequent use and disclosure.

PHOTOGRAPHER/MEDIA OFFICER USE ONLY:

Image nos:

Any restrictions on use

Caption: