

About Us

Community Networks is a unique one-stop centre offering health and social services, information and advice throughout the Upper Clutha area. Operated by the Alpine Community Development Trust, Community Networks is run by three staff and many volunteers.

Services include:

- **A 'Heartlands' Service Centre** – We facilitate regular visits from Government and Non-government organisations to offer services to the community. These include IRD, Community Law, Justices of the Peace, Volunteering Central, Budget Advice, Senior Services information, and Careers Services. We also hold an extensive range of social support information such as Immigration forms, Work and Income forms, and details of health professionals and counselling services.
- **Facilitation and Coordination** – We coordinate a range of activities and services including a School Holiday Club, Community Food Bank, Meals on Wheels, Wheels to Dunstan Bus Service, Total Mobility Vouchers, and a local interagency meeting of social service providers.
- **Strategic Community Development** – We work alongside the community to identify gaps in services and advocate on their behalf to increase social capital. Examples include: Wanaka Alcohol Group, Life Matters Suicide Prevention Group, Champion for Older People Group.
- **Rooms for hire** – We have rooms and office space available for hire for business and not-for-profit organisations.

Contact:

Kate Murray (Manager)

Abbey Lewis (Heartlands Coordinator)

Jan Scown (School Holiday Coordinator)

73 Brownston Street, Wanaka 9305

Phone: (03) 443 7799 Fax: (03) 443 7803

www.communitynetworks.co.nz

info@communitynetworks.co.nz

Role Description - *Volunteer (Meals on Wheels)*

Position:	Community Networks Volunteer – Meals on Wheels driver	
Reports to:	Manager, Community Networks	
Location:	Community Networks Office, 73 Brownston St, Wanaka	
Key tasks and responsibilities:	<ul style="list-style-type: none"> • To work in conjunction with the Manager and Receptionist to provide a community service by delivering Meals on Wheels • To uplift meals from Elmslie House, Stone St, 11-11.30am • To deliver the meals to recipients on the roster, and inform doctor, then Community Networks if any recipients are found unwell. • If you are unable to get a response at the house please call Community Networks 443 7799 as soon as you are able. • If unable to do rostered week, please attempt to find a relief driver and then contact Community Networks to advise of the change. 	
Time Commitment:	One week every 2-3 months, or as rostered.	
Screening required:	Police check:	YES
	References:	YES
Support and supervision:	Staff are always available to answer questions or help with any issues that may arise.	
Benefits offered:	Expenses:	Pre-arranged expenses will be reimbursed. Costs of any activities volunteered for will be covered by Community Networks.
	Recognition:	References will be supplied.
Ideal person specification:	Knowledge & skills:	<ul style="list-style-type: none"> • Great interpersonal skills • Good organizational skills • An ability to communicate with clients, simply, clearly and with patience. • Knowledge of the local area. • A current driver's license.
	Personal qualities:	<ul style="list-style-type: none"> • A high level of honesty and confidentiality. • A sense of humour, and plenty of initiative. • Flexibility to volunteer for additional hours, if required. • The ability to work unsupervised. • Be able to work within a roster system and be part of a team.

Application Form - Volunteer

Thank you for taking the time to complete this application form.

This information will be kept confidential.

Name:		
Address:		
Phone:	(Home)	(Mobile)
Email:		

Referees	<i>Please provide the names of two people who know you well and who will speak on your behalf. Please include at least one referee who can comment on your past work or volunteer experience.</i>	
Name:		Name:
Relationship:		Relationship:
Organisation:		Organisation:
Phone:		Phone:
Email:		Email:

<p>What time are you able to give to our organisation? (Please circle)</p> <p>Weekly / Monthly / One-off events</p> <p>Other: _____</p>

<p>Please briefly describe the skills you could bring to Community Networks:</p>
<p>What are your hobbies and/or interests?</p>
<p>What do you hope to gain from volunteering with us?</p>

<p>Do you have a current NZ First Aid Certificate? YES/NO</p>
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Do you have a current NZ Driver's Licence? YES/NO

Do you have your own transport? YES/NO

Are you a permanent resident in the Upper Clutha area? YES/NO
If not, how long are you staying in the Upper Clutha area?

Next of kin (name):

Relationship:

Contact number(s)

Do you have any medical conditions that could affect your ability to carry out volunteer duties? If yes, how could we provide assistance?

I declare that:

- All the information provided in this application is correct.
- I consent to Community Networks contacting the referees provided.
- I am willing to undergo a New Zealand police check.

Applicants' Signature: _____

Date: _____

Agreement - Volunteer

Context

You have agreed to work as an unpaid volunteer for the Alpine Community Development Trust operating as Community Networks Wanaka. As a volunteer this is not a contract of employment but sets out our expectations of you in the work that you do. It also says what you can expect from us. If you have any questions or concerns about what's being asked of you, please talk to us about it.

As a Volunteer I agree to:

- abide by and support the philosophy, policy, and guidelines of the organisation
- act in the best interests of the organisation
- maintain confidentiality
- abide by safety and risk management requirements
- carry out the tasks outlined in the Role Description
- attend on the agreed time and day or contact the Community Networks office on 03 443 7799
- participate in orientation, meetings, and training
- maintain a record of my volunteer hours at the Community Networks office
- raise any matters of concern with Community Networks staff.

(For Volunteer Drivers)

- use a warranted, registered and insured vehicle when driving for the organisation
- Notify the organisation of loss of license or driving related charges

The Organisation agrees to:

- provide information about the organisation
- provide orientation, support, training and supervision
- provide a safe working environment
- provide opportunities for input into the organisational plan and evaluation
- reimburse for pre-approved expenses
- acknowledge and recognise the contribution of volunteers to the organisation

Either Community Networks or you, the Volunteer, can end this agreement at any time by giving 10 days' notice to the other party that it will not continue.

Declaration:

I have read and understood the expectations and requirements in this Agreement, and I accept them:

Volunteer's name _____

Volunteer's signature _____ Date _____

Volunteer Co-ordinator's name _____

Volunteer Co-ordinator's signature _____ Date _____

Checklist – *Volunteer Induction*

Volunteer: _____

Sign/date	Task
	Volunteer information pack given
	Volunteer Application form received
	Police check completed
	References contacted
	Interviewed; specific hours and tasks discussed (added into Agreement)
	Volunteer Agreement signed (both parties)
	Induction – Welcome and orientation. Health and safety / emergency procedures covered. Code of conduct discussed. Further information given if required.

Notes: