

**SUPPORT PERSON APPLICATION FORM**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

EMAIL: \_\_\_\_\_

PH No: \_\_\_\_\_ MB: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Application: \_\_\_\_\_

**MISSION STATEMENT**

Lifestyle Connections Association Inc. provides people with one-on-one lifestyle supports and assistance so that they have opportunities to connect with their community in a valuable and genuine way.

**OUR VISION**

For all people with disabilities to achieve their vision of an ordinary life and have a valued role in community.

**PHILOSOPHY****WE BELIEVE THAT: -**

The opportunity to live an ordinary life within community is a basic human right. This right can be achieved by inclusion in community.

Regardless of the type or degree of disability, everyone is entitled to access services and should have the necessary support.

The value of existing family bonds and social networks must be recognised and respected.

Participation in community activities, including recreation and leisure, is facilitated by individual support.

Including people one at a time in community is the best form of community education, and the best means of gaining community support.

Choice is the key element in all services provided and these services will be tailored to meet the individual needs and goals of the people we serve.

Individualised support should be appropriate to the age, culture and interests of the person using this service.

## REQUIREMENTS

1. A current registered vehicle
  
2. Current Driver's Licence
  
3. Motor Vehicle Insurance
  
4. Criminal History Screening - DS Positive Notice Card   
/Blue Card (If you don't have a positive notice card a Criminal History Screening will be conducted upon employment)

(The cost of the Motor Vehicle expenses is claimable deduction on your tax return)

## PLEASE COMPLETE THE FOLLOWING

1. Please give a brief description of prior involvements in disability related work and community based experiences –

2. This Service helps people with disabilities become involved in lifestyle and recreational activities within the community – what benefits do you think people may achieve as a result of becoming involved in their community and in recreation and leisure pursuits?

3. This Service supports people who may have any manner of disabilities e.g. some people may require a level of personal care in order to meet their support needs. Do you feel confident in providing this level of care? If not why would you prefer not to do this?

4. How would you approach a situation where a person had limited communication skills?

**SCENARIO**

5. A club member suggests that the person you are supporting would be better off participating in the activity at a club with other people with disabilities rather than with people without disabilities – what would be your response?

6. Name 3 or more of your recreational interests -

7. Please list any work experience and qualifications you may have -

**Medical**

Co-participation is a vital element of a Support Persons role, participation in recreation/leisure activities can range from assisting people to exercise and or, physical assistance for peoples mobility. You will also be working closely with people and their families in achieving set outcomes and goals.

To ensure that you are not exposed to a situation that may place you at risk of injury, reinjure or aggravation of an existing physical or physiological condition please identify any current or past conditions that may affect your capacity to work efficiently.

Condition – (Physical/Physiological)	Activities that may place you at risk of injury/re-injury	Prevention methods

**What time frames do you have available?**

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

**REFEREES**

Please nominate three persons who would be available to be contacted verbally as referees

Name \_\_\_\_\_ PH \_\_\_\_\_

Name \_\_\_\_\_ PH \_\_\_\_\_

Name \_\_\_\_\_ PH \_\_\_\_\_

If your application is successful you will be asked to attend an initial interview with the Service Manager/Coordinator. You may then be asked to meet with a Service User and if you are chosen by the Service User to provide support you will need to complete an Online Induction. As part of the induction into Lifestyle Connections you will need to provide current versions of the following:

- **Résumé**
- **Drivers Licence**
- **Criminal history screening**
- **Vehicle Insurance Policy**
- **Vehicle Registration Details**
- **Superannuation details**
- **Tax file number**
- **Banking details for payment**