Community Advisory Committee Application for St George Work Camp Program Assistance

Name of Organisation	
Contact Person	
Project Address	** **
Phone	Mobile
Name of parent body (if applicable)	
Please state your reasons for assistance and provide a detailed description of the project	
including jobs required to be done	
Men required	
When required	
Hours required	
Do you have a COVID	
safe plan (if yes,	
please attach)	
During the course of the project the applicant organisation assumes all obligations and	
responsibilities as applicable under the:	
Work Health and Safety Act 2011	
Work Health and Safety Regulation 2011	
Electrical Safety Act 2002	
 Electrical Safety Regulation 2 	013
I/We understand that I/we will be responsible for the supply of all essential Tools/ Equipment /	
Materials and specialised project supervision where necessary.	
I/We understand that this application will be considered by the Advisory Committee and if	
approval is granted, the Work Camp will endeavour to complete the designated work within	
the required time frame, however the Work Camp reserves the right to cancel any work	
assistance if safety standards are not adhered to, or if in the opinion of the Field Supervisor	
and the Advisory Committee, the project is deemed unsuitable for any reason. No work shall	
infringe on local tradespersons.	
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Signature of ApplicantPlease Print Name	
Privacy Statement	
Queensland Corrective Services is collecting the information on this form to assess and determine an application	
to establish a Work program community service project under Sections 263 and 341 of the <i>Corrective Services</i>	
Act 2006.	
Queensland Corrective Services usually gives some or all of this information to the Queensland Police Service or	
other State, interstate, Commonwealth and international government departments or other entities; to private	
organisations which provide services to offenders and, in some circumstances, to individuals.	
Office use only	
Signed	Date / /
Advisory Committee Recommend	Yes / No
If No (Reason)	Vec / No
Supervisors inspection Required	Yes / No
Chairpersons Approval	