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Work or Development Program (WDP) Application

Organisation Details

Organisation name

Contact name

Organisation address

Contact phone number

Email address

Would you like your organisation's details to be publicised on the Road Transport Authority's website?

☐ Yes ☐ No

Program Details

Program name

Program objectives

Location/s where program is held

Staff Experience/Qualifications

Staff member	Relevant experience	Relevant qualifications

Risk management details

Are the risks for participants assessed?

☐ Yes ☐ No

Are risk management strategies implemented to address risks?

☐ Yes ☐ No

Public liability insurance, OH&S policy & procedures and Governance Arrangements details

Insurance provider	Policy type

Policy number	Cover amount	Expiry date

Please attach a copy of your OH&S policy and procedures and tick this box to indicate you have attached. ☐

Please attach your organisation chart and tick this box to indicate it is attached. ☐

Declaration

As an approved provider of community work and development programs, I understand that we may be audited and therefore I agree to ensure this organisation, in line with the guidelines will:

- work in co-operation with the Road Transport Authority (RTA)
- seek advice from the RTA when confronted with any conflict of interest or perceived conflict of interest that may arise when supervising a WDP / VCWO
- ensure all staff/volunteers are registered under the *Working with Vulnerable People (Background Check) Act 2011*
- have a complaints handling procedure in place
- provide reports on all WDP / VCWOs that I oversee in relation to:
    - any noncompliance with the WDP / VCWO;
    - any termination of a persons WDP / VCWO;
    - a person completing a WDP / VCWO; and
- keep a record of a persons participation in a WDP / VCWO.
- provide any additional information that the RTA may request.

I also understand that the Organisation's name, location, contact details and approved activities/services may be made available in ACT Government publications.

☐ I agree to the above terms

Name of person completing application

Position held within the organisation

Signature

Date

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