



# **CREST Queensland**

## **Membership Pack**

*Includes:*

- CREST Qld Constitution
- Application for Membership form
- Positive Notice Blue Card application/renewal form
- Authorisation of Valid Positive Notice Blue Card form
- Email Policy
- Password Policy
- Volunteer Agreement Form
- Volunteer Criminal History Consent Form



# CREST Queensland

Incorporated ABN 94 674 126 862

CREST Queensland  
P.O. Box 15961  
City East, QLD  
4002

Phone: 07 3088 2943  
Email: info@crestqld.org.au  
Website: www.crestqld.org.au

## Application for Membership Form

### Personal Details:

Name: (.....) .....

Address: .....

Suburb: ..... State: ..... P/Code: .....

Email Address/s: .....

Date of birth: .....

Phone No: (h) ..... (w) ..... (f) .....

(m) .....

Drivers Licence No: ..... State: .....

Vehicle Classes: .....

Call signs Used: .....

Licensed Radio Call sign (If Amateur, etc) .....

Qualifications and Certificates: .....

.....

.....

.....

.....

.....

First Aid Certificate: .....Y/ .....N      Details: .....

Current Employment Details .....

..... Ph. No: .....

CB Transceiver (Radio) Equipment held: .....

.....

.....

.....

Have you ever been a member of any other monitoring organisation/s? .....Y/ ..... N

Details: .....

Date Resigned: .....

Community Service Involvements: .....

.....

.....

Why do you wish to join CREST? .....

.....

Do you have any special needs?

If YES please write a detailed medical report below regarding your special needs so that you may be accommodated within this organisation.

.....

.....

Have you incurred any convictions, other than traffic infringements, in the past 5 years? ..... Y/ ..... N

(If YES please attach details in a sealed envelope marked 'Confidential'. It will be treated with the UTMOST CONFIDENCE and does not automatically preclude acceptance).

An initial membership fee will be payable on acceptance as a CREST monitor. **DO NOT** enclose monies with this form. Each year, an Annual Membership Fee is charged.

I state that the above information is true and correct.

**Signature of Applicant:** \_\_\_\_\_

**Date:** .....



# CREST Queensland

Incorporated

9 – EMAIL POLICY

ABN 94 674 126 862

CREST Queensland  
P.O. Box 15961  
City East, QLD  
4002

Phone: 07 3088 2943  
Email: [info@crestqld.org.au](mailto:info@crestqld.org.au)  
Website: [www.crestqld.org.au](http://www.crestqld.org.au)

## Email Policy

### 1.0 Purpose

To prevent tarnishing the public image of Citizens Radio Emergency Service Teams Queensland Incorporated When email goes out from Citizens Radio Emergency Service Teams Queensland Incorporated the general public will tend to view that message as an official policy statement from the Citizens Radio Emergency Service Teams Queensland Incorporated.

### 2.0 Scope

This policy covers appropriate use of any email sent from a Citizens Radio Emergency Service Teams Queensland Incorporated email address and applies to all employees, vendors, and agents operating on behalf of Citizens Radio Emergency Service Teams Queensland Incorporated.

### 3.0 Policy

#### **3.1 Prohibited Use.**

The Citizens Radio Emergency Service Teams Queensland Incorporated email system shall not be used for the creation or distribution of any disruptive or offensive messages, including offensive comments about race, gender, hair color, disabilities, age, sexual orientation, pornography, religious beliefs and practice, political beliefs, or national origin. Employees who receive any emails with this content from any Citizens Radio Emergency Service Teams Queensland Incorporated employee should report the matter to their supervisor immediately.

#### **3.2 Personal Use.**

Using a reasonable amount of Citizens Radio Emergency Service Teams Queensland Incorporated resources for personal emails is acceptable, but non-CREST related email shall be saved in a separate folder from operational related email. Sending chain letters or joke emails from a Citizens Radio Emergency Service Teams Queensland Incorporated email account is strictly prohibited. Virus or other malware warnings and mass mailings from Citizens Radio Emergency Service Teams Queensland Incorporated shall be approved by Citizens Radio Emergency Service Teams Queensland Incorporated VP Operations before sending. These restrictions also apply to the forwarding of mail received by a Citizens Radio Emergency Service Teams Queensland Incorporated staff.

### **3.3 Monitoring**

Citizens Radio Emergency Service Teams Queensland Incorporated staff shall have no expectation of privacy in anything they store, send or receive on the company's email system. Citizens Radio Emergency Service Teams Queensland Incorporated may monitor messages without prior notice. Citizens Radio Emergency Service Teams Queensland Incorporated is not obliged to monitor email messages.

### **4.0 Enforcement**

Any volunteer found to have violated this policy may be subject to disciplinary action, up to and including termination of membership.

### **5.0 Definitions**

<b>Term</b>	<b>Definition</b>
<i>Email</i>	The electronic transmission of information through a mail protocol such as SMTP or IMAP. Typical email clients include Eudora and Microsoft Outlook.
<i>Forwarded email</i>	Email resent from an internal network to an outside point.
<i>Chain email or letter</i>	Email sent to successive people. Typically the body of the note has direction to send out multiple copies of the note and promises good luck or money if the direction is followed.
<i>Sensitive information</i>	Information is considered sensitive if it can be damaging to Citizens Radio Emergency Service Teams Queensland Incorporated or its customers' reputation or market standing.
<i>Virus warning</i>	Email containing warnings about virus or malware. The overwhelming majority of these emails turn out to be a hoax and contain bogus information usually intent only on frightening or misleading users.
<i>Unauthorized Disclosure</i>	The intentional or unintentional revealing of restricted information to people, both inside and outside Citizens Radio Emergency Service Teams Queensland Incorporated, who do not have a need to know that information.

Signed .....

Name .....

Dated ...../...../.....



# CREST Queensland

Incorporated

9 – PASS POLICY

ABN 94 674 126 862

CREST Queensland  
Incorporated  
P.O. Box 15961  
City East, QLD

Phone: 07 3088 2943  
Email: [info@crestqld.org.au](mailto:info@crestqld.org.au)  
Website: [www.crestqld.org.au](http://www.crestqld.org.au)

## Password Policy

### 1. Overview

Passwords are an important aspect of computer security. They are the front line of protection for user accounts. A poorly chosen password may result in the compromise of Citizens Radio Emergency Service Teams Queensland Incorporated entire network. As such, all volunteers (including contractors and vendors with access to Citizens Radio Emergency Service Teams Queensland Incorporated systems) are responsible for taking the appropriate steps, as outlined below, to select and secure their passwords.

### 2. Purpose

The purpose of this policy is to establish a standard for the creation of strong passwords, the protection of those passwords, and the frequency of change.

### 3. Scope

The scope of this policy includes all personnel who have or are responsible for an account (or any form of access that supports or requires a password) on any system that resides at any Citizens Radio Emergency Service Teams Queensland Incorporated facility, has access to the Citizens Radio Emergency Service Teams Queensland Incorporated network, or stores any non-public Citizens Radio Emergency Service Teams Queensland Incorporated information.

### 4. Policy

1. All system-level passwords (e.g., root, enable, NT admin, application administration accounts, etc.) must be changed on at least a quarterly basis.
2. All user-level passwords (e.g., e-mail, web, desktop computer, etc.) must be changed at least every six months. The recommended change interval is every four months.
3. Each successive password must be unique. Re-use of the same password will not be allowed.
4. Passwords must be a minimum of eight (8) characters long.
5. User accounts that have system-level privileges granted through group memberships or programs such as "sudo" must have a unique password from all other accounts held by that user.

6. Passwords must not be inserted into e-mail messages or other forms of electronic communication.
7. Passwords should never be written down or stored online.

#### 4.1 Password Construction Guidelines

Passwords are used for various purposes at the Citizens Radio Emergency Service Teams Queensland Incorporated. Some of the more common uses include: user-level accounts, web accounts, e-mail accounts, screen saver protection, voice-mail password, and local router logins. Since very few systems have support for one-time tokens (i.e., dynamic passwords which are only used once), everyone should be aware of how to select strong passwords.

1. Poor (unacceptable) passwords have the following characteristics:
  - a. The password contains fewer than eight characters.
  - b. The password is a word found in a dictionary (English or foreign).
  - c. The password is a common usage word such as:
    - o names of family, pets, friends, co-workers, fantasy characters, etc.
    - o computer terms and names, commands, sites, companies, hardware, software
    - o acronyms for the agency or city
    - o birthdays and other personal information such as addresses and phone numbers
    - o word or number patterns like aaabbb, qwerty, zyxwvuts, 123321, etc.
    - o any of the above spelled backwards
    - o any of the above preceded or followed by a digit (e.g., secret1, 1secret)
2. Strong (acceptable) passwords have the following characteristics:
  - . Contain both upper and lowercase characters (e.g., a?z and A?Z).
  - a. Have digits and punctuation characters as well as letters (e.g., 0?9 and !@#\$%^&\*()\_+|~-=\`{ } [ ] : " ; í < > ? , . /).
  - b. Are at least eight alphanumeric characters long.
  - c. Are not a word in any language, slang, dialect, jargon, etc.
  - d. Are not based on personal information, names of family, etc.
  - e. Can be easily remembered. One way to do this is create a password based on a song title, affirmation, or other phrase. For example, the phrase might be: "This May Be One Way To Remember" and the password could be: "TmB1w2R!" or "Tmb1W>r~" or some other variation. (NOTE: Do not use either of these examples as passwords!)

#### 4.2 Password Protection Standards

1. Do not use the same password for Citizens Radio Emergency Service Teams Queensland Incorporated accounts as for other non-[ Name of Organization] access (e.g., personal ISP account, option trading, benefits, etc.). Where possible, don't use the same password for the various Citizens Radio Emergency Service Teams Queensland Incorporated access needs. For example, select one password for the e-mail systems and a separate password for network systems. Also, select a separate password to be used for an NT account and a UNIX account.

2. Do not share agency passwords *with anyone*, including administrative assistants or secretaries. All passwords are to be treated as sensitive, confidential Citizens Radio Emergency Service Teams Queensland Incorporated information.
3. If someone demands a password, refer them to this document or have them call someone in the State Operations Committee.
4. Do not use the "Remember Password" feature of applications (e.g., Eudora, Outlook, Netscape Messenger).
5. Do not write passwords down and store them anywhere in your office. Do not store passwords in a file on ANY computer system (including Palm Pilots or similar devices) without encryption.
6. Change passwords at least once every six months (except system-level passwords which must be changed quarterly). The recommended change interval is every four months.
7. If an account or password is suspected to have been compromised, report the incident to the State Operations Director and change all passwords.

## 5. Enforcement

Any volunteer found to have violated this policy may be subject to disciplinary action and loss of network privileges.

Signed .....

Name .....

Dated ...../...../.....





# CREST Queensland

ABN 94 674 126 862

CREST Queensland  
P.O. Box 15961  
City East, QLD  
4002

Phone: 07 3088 2943  
Email: info@crestqld.org.au  
Website: www.crestqld.org.au

## **Citizens Radio Emergency Service Teams Queensland Inc Volunteer Agreement**

*This agreement is intended to indicate the seriousness with which we treat our volunteers. The intent of the agreement is to assure you of our deep appreciation for your services and to indicate our commitment to doing the very best we can to make your volunteer experience here a productive and rewarding one.*

### **I Citizens Radio Emergency Service Teams Queensland Inc**

We, Citizens Radio Emergency Service Teams Queensland Inc, agree to accept the services of

\_\_\_\_\_ **(your name)**

And we commit to the following:

- To provide adequate information, training, and assistance for the volunteer to be able to meet the responsibilities of their position.
- To ensure diligent supervisory aid to the volunteer and to provide feedback of their performance.
- To respect the skills, dignity and individual needs of the volunteer, and to do our best to adjust to these individual requirements.
- To be receptive to any comments from the volunteer regarding ways in which we might mutually better accomplish our respective tasks.
- To provide adequate protection through appropriate insurance.
- To reimburse out of pocket expenses when undertaking tasks outside of normal duties performed at the centre.

### **II VOLUNTEER**

I, (your name) \_\_\_\_\_,  
as a volunteer, agree to commit to the following:

- To perform my duties to the best of my ability.
- To adhere to the Citizens Radio Emergency Service Teams Queensland Inc core values, policies and procedures.

To meet time and duty commitment, or to provide adequate notice so that alternate arrangements can be made.

- To adhere to the confidentiality agreement of the Citizens Radio Emergency Service Teams Queensland Inc which states that:

All volunteers who have access to private and confidential information have a responsibility to ensure that it is not inappropriately discussed, released or taken from the organisation.

Confidential information includes but is not limited to trade secrets, and any information relating to:

- Client and families
- Volunteers
- Supporters
- Business affairs
- Accounting, marketing, business or sales plans
- Proposals
- Research
- Management
- Financial reports
- Software
- Other documents

Whether in writing, on the internet or otherwise, concerning the Citizens Radio Emergency Service Teams Queensland or its members, related bodies or any of their customers, supporters or suppliers.

- To adhere to Citizens Radio Emergency Service Teams Queensland’s copyright policy which states that all work and tasks performed on behalf of the Citizens Radio Emergency Service Teams Queensland remains the property of the Citizens Radio Emergency Service Teams Queensland and is protected by copyright laws.

**III AGREED TO:**

Volunteer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness Name: \_\_\_\_\_

Witness Signature: \_\_\_\_\_

Please return completed form to Citizens Radio Emergency Service Teams Queensland at PO Box 15961, City East, QLD 4002 or email: [info@crestqld.org.au](mailto:info@crestqld.org.au)



# Volunteer screening consent form

## GENERAL CRIMINAL HISTORY CHECK

### INSTRUCTIONS:

After completing this consent form, please submit it, along with your application and other required documents, to the State Executive. You may complete this form at your computer, then print. If you are completing this form by hand, please print clearly using dark ink.

- If you have any questions about completing this form, call the state duty number at: 07 3088 2943
- Please use BLOCK LETTERS – all fields are mandatory unless otherwise stated

### Section 1: Applicant Details

Title   Male  Female Date of Birth

Family name/surname

First name/given names  Middle name/s

Australian Drivers Licence No.  Australian driver's licence state

### Section 2: Other Names You Have Used

Family name/surname

First name/given names  Middle name/s

---

Family name/surname

First name/given names  Middle name/s

**Note:** If you need to record additional names please attach to this form

### Section 3: Current Residential Address

Unit/Street No  Street name  Street type

Suburb/Town  Post code

Country  State

### Section 4: Contact Details

Area code  Contact Phone No:  Mobile No:

Email

### Section 5: Country of Origin

Were you born in Australia?

Yes Town/City  State

No Country of birth

### Section 6: New Zealand residency

During the last ten years, have you lived in New Zealand for six months or more (since turning 16 years of age)?  Yes  No

Unit/Street No  Street name  Street type

Suburb/Town  Post code

**Note:** If you need to record additional items, please attach to this form



# Volunteer screening consent form

## Section 7: Proof of Identity

Citizens Radio Emergency Service Teams Queensland must be able to confirm your name, date of birth and signature. Examples of acceptable identification documents are as follows;

- Australian Drivers Licence
- Australian Student Identification Card
- Passport
- Debit Card
- Proof of Age Card
- Australian Citizenship or Immigration Documentation
- Government financial benefit card
- Certificate of Birth (or extract) or Marriage

### STATEMENT OF TRUTH:

**Use of criminal history information (please read and tick appropriate box below):**

- I consent to the Citizens Radio Emergency Service Teams Queensland Incorporated, as a third party, obtaining information about my criminal history, if any, from the police, courts, prosecuting authorities or any other relevant law enforcement agencies.
- I understand that once my consent is provided my prospective organisation is entitled, by law, to use the criminal history information, if any, to assess my suitability for appointment to the role I have applied for.

Note 1: You must indicate your consent by checking the above boxes. Please see Note 2 for consequences of failure to consent.

Note 2: If you do not consent to the above use of your criminal history information by your prospective organisation, your application will not be considered further by the prospective organisation.

**Disclosure of criminal history information (please read and tick appropriate box below):**

- I consent to my prospective organisation disclosing the criminal history information, at any time, to:

If my prospective relevant organisation:

- the Citizens Radio Emergency Service Teams Queensland Incorporated for secure electronic storage (as the Citizens Radio Emergency Service Teams Queensland Incorporated is the central administrator of criminal history information)
- another organisation with whom request for the file due to application for membership or transfer (Organisations are as follows: Citizens Radio Emergency Service Teams NSW Incorporated (CREST NSW), Citizens Radio Emergency Service Teams VIC Incorporated (CREST VIC), Australian Citizens Radio Emergency Monitors (ACREM))

Note 3: If you do not consent to the above disclosure by your prospective relevant health employer, your application for employment cannot be considered further by the prospective relevant health employer.

### Privacy Notice

Personal information collected by the Citizens Radio Emergency Service Teams Queensland Incorporated is handled in accordance with the Information *Privacy Act 2009*. The personal information provided by you will be securely stored and made available only to appropriately authorised officers of the organisation. Personal information recorded on this form will not be disclosed to other parties without your consent, unless required by law.

### Volunteer Certification

I understand that personal information in relation to my employment may be provided to other Organisations, or other agents engaged by The Citizens Radio Emergency Service Teams Queensland Incorporated as authorised in the event of my transfer/movement to another organisation employer within the Citizens Radio Emergency Service Teams Australia. This may include pre-volunteer screening information and relevant personal information.

Signature of applicant

Date

--	--

*Signed in the presence of a witness who must be able to verify the identity of the applicant and be aged 18 or over.*

Signature of witness

Name of witness

--	--

Contact Phone No:

--