**Volunteer Application Form**

**Short description of your organization**

*Since the target individuals will be volunteering to work for your organization, start with giving information about your establishment so that the applicants know what they are getting into. Some of the details to feature here include what you do, the principles that govern your existence, office hours, and your ultimate mission. By reading these specific details, potential volunteers can picture what awaits them and make an informed decision if they indeed want to be a part of your establishment.*

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| --- |
| **Personal Details** |
| Name |  |
| Address | Postcode: |
| Phone  | Home:Mobile:Work (if applicable) |
| Email |  |

|  |
| --- |
| **Which volunteer roles are you interested in?** |
|

|  |  |  |  |
| --- | --- | --- | --- |
| Administration | ¨ |   Website  | ¨ |
| Fundraising | ¨ |  Press & Publicity | ¨ |
| Not sure yet | ¨ |  |  |

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| **Please tell us about any work, volunteering, personal experience or skills that you have that are relevant to the role you are interested in** |
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| **Availability**At what times are you interested in volunteering – please tick as many as you like |
|

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Mon | Tue | Wed | Thurs | Fri | Sat | Sun |
| Morning |  |  |  |  |  |  |  |
| Afternoon |  |  |  |  |  |  |  |
| Evening |  |  |  |  |  |  |  |

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| **Do you have any particular needs that we should be aware of so as to best support your volunteering with us?** |
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| **References** |
| To complete your application, we need you to supply us with two people who know you well enough to comment on your suitability for this role. They should not be family members. If you are not sure about who to put we are happy to discuss this with you |

|  |  |
| --- | --- |
| Referee 1 |  |
| Name: |  |
| Address: | Postcode: |
| Phone: |  |
| Email: |  |
| How does this person know you? |  |

|  |  |
| --- | --- |
| Referee 2 |  |
| Name: |  |
| Address: | Postcode: |
| Phone: |  |
| Email: |  |
| How does this person know you? |  |

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| **If your volunteering role falls within the Rehabilitation of Offenders Act 1974 or is a specified or regulated activity, we will require you to a DBS check**.  |
| We welcome volunteer applications from every one. Having a criminal record will not necessarily exclude you from volunteering with us and your application will be dependent on the nature of the offence and position applied for.  |

|  |  |
| --- | --- |
| **Signed** |  |
| **Date** |  |

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| --- |
| **How did you hear about us? (please circle where you heard about us)** |
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|  |  |  |
| --- | --- | --- |
| **Volunteer centre** | **Our Website** | **Our leaflet** |
| **Other organisation** | **Other website** | **Word of mouth** |
| **Friend or family** | **Other (please state)** |  |

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| **Thank you for taking the time to complete this form. Please return this for to:** |
|  |