

For Office Use: Ref No:

DBS Ref:



APPLICATION FOR A VOLUNTEERING ROLE

Part one – Personal Details

Surname: First Name(s):

Home Address:

Postcode:

Telephone: (Home) (Mobile)

Email:

Date of birth (optional):

Part two – Volunteering

Please indicate which of the following volunteering roles you are interested in:

- Community Support Volunteer
- Telephone Support Service
- Walking Group
- Roots Garden mentor
- Charity Shop
- Other (please detail)

Please indicate why the role interests you:

What are you hoping to gain from volunteering with Help & Care?

Do you have any skills, experience or interests that may support you in your work with Help & Care? – for example, other volunteering, former or current employment, training, life experience or hobbies?

Part three – Additional Information

Please tell us where you heard about Help & Care and about this volunteering opportunity:

Do you have a current driving licence? YES NO

Do you have your own transport? YES NO

Do you have current car insurance? YES NO

These are some things that we need for certain roles

- Using electric garden equipment
- Working Outside
- Working on your own
- Travelling more than 15 miles from your home
- Using a computer
- Handling Cash

Are there any tasks that you would prefer NOT or cannot undertake (please indicate)

Please tick to indicate your availability for volunteering for part or all of a time period below:

	AM (9-12)	PM (1-5)	EVENING
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Part four – Character References

Please give details of two people who can comment on your suitability for the role of volunteer, and state in what capacity these people are known to you.

Reference 1

Name:

Address:

Telephone Number: Email:

Relationship to you:

Reference 2

Name:

Address:

Telephone Number: Email:

Relationship to you:

Part five – Declaration

'I declare that all the information on this application form, plus any other documents relating to this application is, to the best of my knowledge and belief, true and correct. I understand that any false statement may give cause for my volunteering being discontinued'

Signed: Date:

Information you provide in connection with this application will not be disclosed outside our organisation, except to referees. Application forms of active volunteers are retained in accordance with current data protection legislation.

Please return this form to: 896 Christchurch Road, Pokesdown, Bournemouth, BH7 6DL

Or email: volunteerservices@helpandcare.org.uk

