**Volunteer Application**

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| **Title of Volunteer Role** |  |

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| **Name** |  |
| **Address** |  |
| **Telephone Numbers -****Daytime****Evening****Mobile** |  |
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| **Email Address** |  |

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| **Qualifications or courses undertaken – please provide a brief list** |
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| **Work Experience paid or voluntary – please provide a brief outline** |
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| **Having read the Role Description – what has attracted you to this particular Volunteer Role?**  |
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| **Having read the Role Description – are you able to make a commitment to the time required to undertake this role?** |
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| **Do you have a driving licence?** |  |
| **If you have a driving licence does it state you have category D1 (see** [**https://www.gov.uk/driving-licence-categories**](https://www.gov.uk/driving-licence-categories)**)?** |  |
| **Do you have access to a vehicle which you are prepared to use within your volunteering role if requested? (please tick as appropriate)** | **Car/Van****🞏** | **Motorbike/Scooter**🞏 | **Bicycle**🞏 |

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| **Have you been convicted of any criminal offence which is not considered ‘spent’ under the Rehabilitation of Offenders Act 1974?** Criminal records will only be taken into account for recruitment purposes when the conviction is relevant. Having unspent convictions will not necessarily bar you from volunteering. |
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| **Referee 1 - Please provide the name and contact details for two persons (unrelated to you) whom you have known for three years in a personal, work or voluntary capacity and has agreed to provide a reference for you** |
| **Name** |  |
| **Address** |  |
| **Contact telephone number** |  |
| **Email address (if referee has one)** |  |

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| **Referee 2**  |
| **Name** |  |
| **Address** |  |
| **Contact telephone number** |  |
| **Email address (if referee has one)** |  |

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| **Emergency Contact**  |
| **Name** |  |
| **Telephone Numbers –****Daytime****Evening****Mobile** |  |
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I have completed this application to the best of my ability and believe the information provided by me is accurate and correct.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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