

Volunteer Application Form

If you have difficulty with any of the questions please ask us for help, our contact information is below

Your Details			
Surname:	Forename(s):	Pronouns:	Title:
Address:			Post Code:
Telephone Number	Home:	Mobile:	
	Work:		
E-mail: (If possible)			
Date of Birth:			
Ethnicity: (Please highlight)	White British / White Irish / Other White / Asian Indian / Asian Pakistani / Asian Bangladeshi / Other Asian / Black Caribbean / Black African / Other Black / Chinese / Mixed White and Black Caribbean / Mixed White and Black African / Mixed White and Asian / Other Mixed / Other Ethnic Group		

Emergency Contact Details			
Surname:	Forename(s):	Title:	Relation:
Address:			Post Code:
Emergency Contact Telephone Number(s) (If any, and if willing to be contacted at work)	Home:	Mobile:	
	Work:		

Why would you like to volunteer for Age UK Hull?

Have you any experience or training which might be useful to the voluntary role?

Have you any disabilities or particular health issues that the organisation needs to be aware of?

Do you have any hobbies or interests?

**In Confidentiality: Do you have any criminal convictions?
YES / NO**

Where did you hear about volunteering with us? (please tick)

<input type="checkbox"/>	Event/Outreach	What event?
<input type="checkbox"/>	Social Media	Instagram/Facebook/LinkedIn/Tik Tok/Twitter <small>(circle which one)</small>
<input type="checkbox"/>	Advertisement	Where did you see it?
<input type="checkbox"/>	Website	
<input type="checkbox"/>	Other	

Volunteer Roles	Tick the role(s) you are applying for	Location: Hull / East Yorkshire
Befriending Telephone		
Befriending Home Visiting		
Befriending Penpal		
Information & Advice		
Social Groups		
Office / Admin		
Fundraising		
Community Companion		
Events		
I.T Class Tutor		

What days and times would you be available to volunteer for Age UK Hull?

Any time you can give, however little, will be greatly appreciated.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
am / pm	am / pm	am / pm	am / pm	am / pm	am / pm	am / pm

Weekly	Fortnightly	Monthly	As and when needed

References

Please note below the names and addresses of **two people** from whom we can obtain references who you have known for a **minimum of 2 years**. *i.e. representative from your church, current / previous employer, manager or supervisor, or a friend or neighbour*

PLEASE DO NOT ASK FAMILY MEMBERS, AS THESE ARE NOT ACCEPTED AS REFERENCES.

Name:	Name:
Tel:	Tel :
E-mail:	E-mail:
Address:	Address:
Postcode:	Postcode:

