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**Volunteer Application Form**

**Your details**

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| Name: | Emergency contact name: |
| Telephone: | Emergency contact telephone: |
| Address: | Emergency contact relationship: |
|  | Emergency contact address: |
| Postcode: | Emergency contact postcode: |
| Email address: | Emergency contact email address: |
| Gender: Male Female | Has this person agreed to be Yes NoYour emergency contact?  |
| If for any reason you prefer not to give emergency contact  | details please sign below: |
| Signed: |  |
| Do you have any health needs that you Yes NoWant to share with us so that we can better support you?For example, you may have panic attacks – and needus to know how best to help. Please specify: | Do you have any access needs, Yes Noe.g. for a wheelchair or large printfor reading? We will use this informationto assess which volunteer environmentsare most suitable for you.Please specify: |
|  | Do you have a driving licence? Yes No |
|  | Do you have any convictions, cautions, reprimands or warnings as defined by the Rehabilitation Offenders’ Act 1974? Yes NoIf you answered yes, please provide more details of your conviction in a sealed envelope. Applications are reviewed individually and, please note, javing a criminal coviction will NOT necessarily prevent you from volunteering with Age UK. |
| **The volunteer role** |  |
| Role applied for (if appropriate) or roles that interest you:Please tell us a little bit about yourself including any skills and experience to support your application.Please do feel free to continue on a separate sheet: | What is the main reason for volunteering for Age UK Barnsley?   The Age UK Barnsley charitable cause To meet new people To add skills to my CV Work experience Other Please specify: |
| How did you find out about us? Family or friend Shop poster Newspaper or TV advertisement Age UK website Other Please specify: |
| **Your age:** |  |  Under 16\* 16-20 21-30 |  31-50 51-60 61-70 Over 70 |
| **Your Availability** | **Monday** AMPM **Tuesday**  |  AM PM **Wednesday** AMPM  |
|  **Thursday AM**  |  **PM Friday AM PM**  | **Saturday** AM PM **Sunday**  AM PM |
| Name and contact details of two referees, who have known you for at least two years and are NOT family members: |
| Referee one:  | Referee two: |
| How do you know referee one? | How do you know referee two: |
| Referee telephone number: | Referee telephone number: |
| Referee email address: | Referee email address: |
| Referee address: | Referee address: |
| From time to time we will send youm updates and information about volunteering at Age UK Barnsley. Please tick if you agree that we may also send you other updates and information. Email Post |
| I understand that any volunteer role offer with Age UK Barnsley is subject to appropriate references and that Age UK Barnsley has a comprehensive set of policies and values that reflect the Age UK Barnsley approach and that of our volunteers  |
| Signature : | Date: |
| We are extremely grateful for your interest in volunteering with Age UK Barnsley and look forward to hearing about your experience with us. |

**Data Protection** The data provided on this form will be used by Age UK Barnsley for the purpose of supporting our volunteers – and administering, evaluating and monitoring the equality of our volunteer management. We shall use the information you have supplied to us in line with Data Protection Guidelines. We will not contact you about our products, services and the vital work we do for older people if you have not indicated that we may do so (above). Information held by Age UK Barnsley is strictly confidential and we do not pass on any personal data about you to organisations and / or individuals without your consent.