

**Volunteer Application Form**

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| **Title: Forename(s): Surname:** | | |
| **Address:**  **Postal Code:**  **(Month and Year) when you moved to this address:** | | |
| **Telephone:** | | |
| **Ethnicity:** | **Date of birth:** | |
| **Email:** | **Gender: Male/ Female** | |
| **Car driver: Y/N** | **Have own car: Y/N** |

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| **Outline any previous experience, skills, interests, hobbies** |
| **How much time do you have available for volunteering?**  (Please indicate times/days which are convenient for you)  **Days? Times?** |

**How did you find out about voluntary work with us?**

(Please tick any boxes below)

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| Family or friend |  | Volunteer Centre Bexley |  |
| Newspaper or TV/Radio |  | Age UK Website/poster |  |
| Other (please give details) | | | |

**What are your reasons for volunteering?** (Please tick any of the boxes below)

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| To gain work experience |  | The Age UK charitable cause |  |
| To develop new skills |  | To meet new people |  |
| Additional reasons or comments | | | |
| In order that we may offer you appropriate support in your volunteer role, please advise us of any health problems or medical conditions that you think may affect the type of volunteer duties that you can do. | | | |

In both the interests of yourself and the people with whom you will be working, we require a reference from two referees **who have known you for at least  
2 years***.* These referees ***MUST NOT BE FAMILY MEMBERS.***

**If your circumstances mean that you are unable to provide current references, we will be happy to discuss this further with you.**

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| Name:  Address:  Postcode:  Email:  Relationship to you: | Name:  Address:  Postcode:  Email:  Relationship to you: |

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| As an agency working with vulnerable people, certain volunteer roles are considered exempt from the provisions of the Rehabilitation of Offenders Act 1974 and any convictions must be declared. You must disclose all previous convictions; none of these may be considered spent.  Have you ever been convicted, warned, reprimanded or  cautioned for a criminal offence, or liable in a civil case? **YES/NO**  If yes, details will be required from you on a separate sheet (in strict confidence).  We may require a criminal records check from the Disclosure and Barring Service Do you give your permission for us to carry out a check? **YES/NO** |

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| **General Data Protection Regulation (GDPR)**  Information on our database is **strictly confidential** and we do not pass on any personal data about you to outside organisations and/or individuals without your express personal consent. Please indicate if you agree that  we may:  Keep basic information from this form on computer **YES/NO**  Contact you by telephone or email  **YES/NO**  In addition, to ensure the charity is able to conduct its business and support it obligations to you as a user of its services it requires some consent to enable it to do this.   1. In order to ensure that we comply with the quality standards, legislative and statutory obligations, reviewing officers may ask to see a selection of client files.   **Please tick this box if you consent to your file being included**   1. Our services may be funded by both statutory and grant based investment. We may be asked to provide names, addresses and dates of birth of people who benefit from this funding. Providing this information may help us to get more funding in the future.   **If you consent to your information being shared, please tick this box\*** 2. I am happy to receive information and updates from the charity as part of my ongoing   Support for its work  **Please tick this box to receive information**  *(\*please note that we will not disclose anything other than your name, address and date of birth to any funding authority and only where that permission has been expressly given by you).* |

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| **Emergency Contact:**  Name:  Tel No:  Relationship to you:  Has this person agreed to be your emergency contact? **YES/NO** |
| I certify that all of the information given on this form is correct  Signature: Date: |

**Thank you for your interest in volunteering with Age UK Bexley.**

**Please return this form to :-**

Lesley Skinner, Volunteer Co-ordinator

Age UK Bexley, Manor House,

Grassington Road

Sidcup

Kent. DA14 6BY