

# Volunteer Application Form

Thank you for your interest in volunteering with Age UK Cornwall and the Isles of Scilly. Age UK look for dynamic and committed volunteers to offer community support, plan activities and help our great Charity! The information you provide in this application form will help us decide how you might be able to help us. It is really useful if you can give as much information as possible about your experience, interests and availability to volunteer.

If you would like to discuss volunteering opportunities before completing this form please do not hesitate to contact us on 01872 266388

<b>Title:</b>		<b>Name:</b>	
<b>Address:</b>			
<b>Postal Code:</b>			
<b>Telephone - Home:</b>		<b>Work:</b>	
<b>Email:</b> <small>(this will be how we contact you, unless you would like us to make alternative arrangements)</small>		<b>Mobile:</b>	
		<b>Car driver: Y/N</b>	<b>Have own car: Y/N</b>

<b>How much time do you have available for volunteering?</b> (Please indicate times/days for example Mondays 2- 4 or all day Tuesdays)	
<b>Days?</b>	<b>Times?</b>

## Skills and Experience

<p>Please tell us why you would you like to be a volunteer with Age UK Cornwall and IOS and what areas of volunteering are you interested in?</p>          
<p>Please tell us about any relevant hobbies, interests and skills that you feel would benefit your volunteering role.</p>          

Please tell us what you hope to gain from your experience with us?

Please indicate how you found out about voluntary work with us?

When will you be able to start volunteering?

In both the interests of yourself and the people with whom you will be working, we require 2 references one professional and one character **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.**

**We will contact the references via email unless you state otherwise.**

Name:

Email:

Tel No:

Relationship to you:

Name:

Email:

Tel No:

Relationship to you:

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 will require a Disclosure and Barring Service (DBS) check.

**This post is subject to a satisfactory Disclosure and Barring Service check, which will disclose all cautions, reprimands and warnings as well as convictions, a copy must be provided to Kerry Martin, as soon as it is received. In addition to completing this application form you are required to provide us with details of all spent and unspent convictions. Please send this information to us under separate, confidential cover to the Director of Human Resources. Remember to include your name, address and the position for which you are applying. We guarantee that the information you provide will be used fairly and will only be seen by those who need to see it as part of the recruitment process.**

**As the Organisation no longer receives a copy of your DBS disclosure we must have sight of the copy you are given as soon as it is received.**

**Data Protection Act 1998**

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 information from this form securely on our computer? **YES/NO**

Send you updates and more information about Age UK Cornwall & The Isles of Scilly? **YES/NO**

**Emergency Contact:**

Name:

Address:

Postcode:

Tel No:

Relationship to you:

Has this person agreed to be your emergency contact? **YES/NO**

I certify that all the information given on this form is true and correct

Signature:

Date:

Once we have received your completed application form we will invite you to attend an induction day at our main office in Truro, where you will be given more information about volunteering with us.

Thank you for your interest in volunteering with Age UK Cornwall & The Isles of Scilly

Please return this form to:

[Kerry.martin@ageukcornwall.org.uk](mailto:Kerry.martin@ageukcornwall.org.uk)

or

Age UK Cornwall & The Isles of Scilly

Boscawen House

Chapel Hill

Truro

TR1 3BN

**For Office Use Only**

<b>Accepted Y/N</b>	<b>References taken:</b>	<b>References received:</b>
<b>D&amp;B check completed:</b>	<b>Start date:</b>	<b>Welcome letter:</b>