|  |
| --- |
| **Name:** |
| **Address:** | **Home Tel:** |
| **Mobile:** |
| **Email:** |
| **Postcode:**  | **Preferred contact method:** |
| **Employment Status** (delete or circle as appropriate):Unemployed Retired Employed (PT) Employed (FT) Student  |
| **Current Occupation:** | **Best time of day to contact you by phone:**  |
| *You don’t have to answer the following two questions, but it may help us to match you up (****for the Keeping in Touch role only****) if you do:* |
| **Your gender:**  | **Your age: 18 – 30 31-49 50+** |

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**The Role(s) you are interested in** (please read the attached role descriptions). Put an **x** in the appropriate box:

|  |  |
| --- | --- |
| **Keeping in Touch Volunteer** (this role involves making phone calls from home) |  |
| **Helping Hands Volunteer** (this role requires a car. See role desc. on govt health guidance) |  |
| **Both/Either** |  |

**Your Availability** (Put a **x** in all that apply. Please be as flexible as possible – selecting all times does not mean you have to cover all but it will help us to know when you might be available):

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Mon | Tues | Wed | Thurs | Fri | Sat | Sun |
| Morning |  |  |  |  |  |  |  |
| Afternoon |  |  |  |  |  |  |  |
| Eve |  |  |  |  |  |  |  |

**What interests you the most about volunteering in this role(s)? Why do you want to volunteer in this particular way? What do you hope to achieve through helping out?**

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**Have you volunteered or worked with older people before**? It doesn’t matter if you haven’t, but it will be useful to know what experience you may have. **If you haven’t, what useful skills do you think you have?**

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**Please tell us a little bit about yourself. If you were writing a profile about yourself what would you include?** For example, you might include information about what you do for work, your hobbies, how you like to spend your time etc.

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**If you are interested in the Keeping in Touch Role please let us know your interests below** (if we can we will match you with someone with similar interests, although this may not always be possible):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Antiques & Collectibles |  | Gardening |  | Photography |  |
| Arts & Crafts |  | History / Local history |  | Radio |  |
| Books |  | Knitting & Sewing |  | Religion |  |
| Computing |  | Languages |  | Sports |  |
| Family & Friends |  | Mining |  | Transport |  |
| Films & TV |  | Music |  | Travel |  |
| Food & Cooking |  | Outdoor Activities |  | Armed Forces |  |
| Games and Crosswords |  | Pets & Animals |  | Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

**If you are interested in the Helping Hands role (only):**

**Do you currently hold a full UK Driver’s Licence?** Yes / No

**If Yes, do you have access to an insured, MOT’d and roadworthy vehicle?** Yes / No

**Where did you find out about Volunteering with Age UK Doncaster?**

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| **Do you already hold a DBS Check (dated within the last year)?** Yes / No |
| If yes, please let us know what level it is (delete or circle as appropriate): Basic Standard Enhanced Enhanced with Barring Not Sure |

* Every volunteer applicant will be treated equally regardless of sex, marital status, sexual orientation, age, disability, race, religious beliefs and ethnic or national origin.
* Age UK Doncaster meets the requirements in respect of exempted questions under the Rehabilitation of Offenders Act 1974.
* You will be asked to declare unspent convictions and/or undertake a full DBS Disclosure for our volunteering roles.

Thank you for applying to volunteer with Age UK in these most unusual of times. Please sign and date below – if you cannot sign and scan the form please type your name in the signature box and this will form your digital signature.

You’re almost done! Please now just let us know the names and contact details of **two people who are able to offer you a reference** on the next page.

*I declare that the information given on this form is true and correct.*

|  |  |  |
| --- | --- | --- |
| ***Signature:*** |  | ***Date:*** |

Please make sure you have answered ALL the questions on this form.

When completed please return by emailing your completed form to:

volunteering@ageukdoncaster.org.uk

**References**

Please provide the details of **two** referees who have known you for 2 years or more and who are happy to be contacted by us. These should **not** be relatives but can be friends. If you have been employed within the last five years one should be your **current, or most recent, employer**.

*Reference 1*

|  |
| --- |
| **Name:** |
| **Address:** | **Tel:** |
| **Mobile:** |
| **Email:** |
| **Relationship (how do you know them):** |  |

*Reference 2*

|  |
| --- |
| **Name:** |
| **Address:** | **Tel:** |
| **Mobile:** |
| **Email:** |
| **Relationship (how do you know them):** |  |

***For Office Use Only***

|  |  |  |
| --- | --- | --- |
| *Date* | *Notes* | *Signed* |
|  |  |  |