

**Volunteer Application Form (over 18’s only)**

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| **Personal details** |
| Title:  | Surname:  | Forenames:  |
| Address:  | Email:  |
| Telephone (Home):  |
| D.O.B:  | Telephone (Mobile):  |
| **Emergency contact** |
| Title:  | Surname:  | Forenames:  |
| Telephone:  | Email:  |
| Relationship:  |
| How did you find out about volunteering with us?  |

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| **Current employment status** |
| Employed (full time) |  | Employed (part time) |  | Retired |  | Student |  |
| Unemployed and seeking employment |  | Not currently seeking employment |  |

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| **Which volunteer roles are you interested in?**  |
| **Retail shops** (Hillingdon) **16+ years** |  | **Helping our Information & Advice Service** (Hillingdon, Brent & Harrow) |  |
| **Befriending/Good Neighbour** **Service** (Hillingdon & Harrow) |  | **Helping people recently discharged from hospital** (Hillingdon) |  |
| **Helping with fundraising** (Hillingdon, Harrow & Brent) |  | **Helping with Reception or Admin** (Hillingdon, Brent, Harrow) |  |
| **Helping at our Social Clubs and groups** (Hillingdon & Harrow) |  | **Digital Inclusion (IT Support)** (Harrow) |  |
| **Advocacy** (Harrow) |  | **Teaching New Skills** (Harrow) |  |
| Please state other volunteering interest: |

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| **When are you available to volunteer? (Please highlight the days & times you can commit to)** |
| **Monday** | Morning | Afternoon | Evening | **Friday** | Morning | Afternoon | Evening |
| **Tuesday** | Morning | Afternoon | Evening | **Saturday** | Morning | Afternoon | Evening |
| **Wednesday** | Morning | Afternoon | Evening | **Sunday** | Morning | Afternoon | Evening |
| **Thursday** | Morning | Afternoon | Evening |  |
| Would you be able to commit to regular, occasional or one-off volunteering?  |

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| **Why would you like to volunteer with us?** |
| What skills and experience can you bring to a volunteer role? (Interests, hobbies, etc.) |

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| **Do you speak any other languages?**  |
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| **Do you require any extra support to volunteer?** |
| Tell us about any health issues that may affect your volunteering activity. We will do our best to provide placements that meet your ability. |
| **References** |
| Please supply the name and contact details of two referees. These should not be family members. Preferably at least one should have known you in a work/volunteering capacity for at least 2 years. A volunteer placement cannot be started until we are in receipt of two references. If you have any queries about your references please contact us.  |
| Name:  | Name:  |
| Address:  | Address:  |
| Telephone No:  | Telephone No:  |
| Email:  | Email:  |
| Relationship:  | Relationship:  |
| Best method to contact referee?  | Best method to contact referee?  |

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| **DBS (Disclosure and Barring Service)** |
| As an agency working with vulnerable people, some volunteer roles are considered exempt from the provisions of the Rehabilitation of Offenders Act 1974 and others are not. Please complete the relevant box for the role you would like to carry out for Age UK Hillingdon, Harrow & Brent. Please note we will also require a DBS check for some exempt roles. You should also be aware that roles may change over time and it may become necessary to request a different level of DBS. We will inform you if this is the case.**Do you have any convictions, cautions, reprimands or final warnings which are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013)? Yes  No** **if yes,** please provide details in a separate sealed envelope/email marked CONFIDENTIAL and including your name and addressed to the Recruiting Manager. **I have attached details of my conviction separately  (Please mark with an X if appropriate.****Do you give your permission to carry out a DBS check?** **Yes  No ** **Are you registered for the DBS Update Service?** **Yes  No ** **If yes, please provide your Certificate number:**  |

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| **Data Protection statement** |
| 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. Information contained on this application form will be used to provide statistical information but will be anonymised. Please confirm your consent **Yes  No **  |

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| **Vehicle** |
| If you are using your car whilst volunteering, you must inform your insurance provider (usually there is no charge for this) |
| Do you have a valid driving license?  | Do you have access to a car?  |

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| **Signature** |
| The information given in this application is, to the best of my knowledge, true and correct. I understand that any false declarations may lead to the withdrawal of a volunteer placement. I give permission for Age UK Hillingdon, Harrow and Brent to contact my nominated referee’s. |
| **Signature of applicant:** | **Date:** |

**If you are returning your application in the post, please send to:**

Unit 2 Chapel Court, 126 Church Road, Hayes, UB3 2LW or

via email to: volunteering@ageukhhb.org.uk