

Volunteer Application Form

Can you help Age UK Plymouth?

Please return your completed form by post to: Volunteer Department, Age UK Plymouth, The William & Patricia Venton Centre, Astor Drive, Mount Gould, Plymouth, PL4 9RD or by email to: volunteer@ageukplymouth.org.uk

Personal Details

Full Name:

Preferred Name:

Date of Birth:

Phone Number:

Email:

Address:

Can we contact you by: Phone Email SMS Post

Background Information

Are you legally entitled to volunteer in the UK? Yes No

How did you find out about volunteering with us?

What are your reasons for wanting to volunteer?

- | | |
|---|---|
| <input type="checkbox"/> Gain experience | <input type="checkbox"/> To meet new people |
| <input type="checkbox"/> Develop/maintain skills | <input type="checkbox"/> I have spare time |
| <input type="checkbox"/> There is a need in the community | <input type="checkbox"/> The cause is important to me |
| <input type="checkbox"/> To get involved in the community | <input type="checkbox"/> To build up my confidence |
| <input type="checkbox"/> To support older people who may be in need | <input type="checkbox"/> Other (please specify) |

Do you require any reasonable adjustments to carry out the recruitment process or to take forward this role? Yes No Unsure

If yes, please tell us how we can support you:

We want to be able to support you in your volunteer role should you be successful. Please let us know if there is any additional support you require to be able to fulfil a volunteer role e.g. support with a disability, accessibility requirements etc. You will also be able to discuss this with your volunteer manager contact at any time.

Are you looking to volunteer as part of a corporate volunteering scheme? Yes No

If yes, what company or organisation is your employer:

How would you describe your digital skills?

What is your employment status?

- | | |
|---|---|
| <input type="checkbox"/> Working: Full Time | <input type="checkbox"/> Long-term sick or disabled |
| <input type="checkbox"/> Working: Part Time | <input type="checkbox"/> Unpaid Carer |
| <input type="checkbox"/> Retired | <input type="checkbox"/> Volunteer |
| <input type="checkbox"/> Student | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Unemployed | |

Do you have any unspent convictions (in line with the Rehabilitation of Offenders Act) or are you subject to any ongoing or pending criminal investigations (in this country or any other)?

Yes No

If yes, please provide more details:

Please use the space below to write any other information which you feel may be relevant to your application:

Role Specific Questions

Which specific role or service are you most interested in?

Please tell us what day and time you will be able to volunteer on:

Day	AM	PM
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Where did you hear about us?

Do you have a current driving license? (Not required to volunteer with us.):

Yes No

If yes, please provide more details:

Have you been a volunteer before? If yes, please provide a brief description of the role and the organisation you volunteered for:

Yes No

Personal Statement: Please provide further details of any personal qualities, skills, experience, knowledge, hobbies & interests that you think would make you a 'good volunteer'.

In line with our policy, we require you to undergo a DBS check. Please confirm that you agree to this:

Yes, I accept doing a DBS No, I do not accept doing a DBS

Are you related to or do you know any member of our staff? (if yes, please specify)

Yes No

References:

Please give details of two referees not related to you. Volunteers cannot commence volunteering with the Charity until two satisfactory references have been received.

Reference 1:

Full Name:

Address:

Phone Number:

Email:

In what capacity does this person know you?

Reference 2:

Full Name:

Address:

Phone Number:

Email:

In what capacity does this person know you?

Declaration:

All the information I have given here is true and accurate. I consent to the use of all this information for considering my volunteer application, and understand that:

- This is an application for a volunteer role
- It will be always treated confidentially
- If I am unsuccessful, I consent to the information being kept for 6 months for any suitable future roles that might become available (if no, the information will be destroyed immediately)

Yes

No

Signature:

Date: