

## **VOLUNTEER APPLICATION FORM**

## **CAN YOU HELP AGE UK PLYMOUTH?**

Please return your completed form to: Volunteer Department, Age UK Plymouth, Astor Drive, Plymouth, PL4 9RD or by email to: volunteer@ageukplymouth.org.uk

PERSONAL DETAILS:
Full Name :
Address :
Phone Number : E-Mail :
Are you registered disabled?: Yes No
If yes, please provide relevant detail :
Do you require additional support in order to be able to volunteer?: Yes No
If yes, please provide support required :
Can we contact you by : Phone Email SMS Post
Would you like to stay up to date with the latest news from Age UK Plymouth delivered straight to your inbox
Yes No
By signing up to our newsletter subscribers agree to receive regular updates from Age UK Plymouth. On occasion we will share information in the newsletter about organisations and businesses we are working with on specific Agustian Elements of the working with one of the working of the
ABOUT YOU:
Why do you want to volunteer with Age UK Plymouth?
Is there any role you are particularly interested in?
Age UK Plymouth has volunteering opportunities in the community and at our two centres, Mount Gould and Plymstock. Where would you prefer to volunteer?
How did you hear about volunteering with Age UK Plymouth?
Have you been a volunteer before?: Yes No
Please provide details:
If your application is successful, which days and times would you be available to volunteer?:
Jour appropriate to succession, which days and arries would you be deallable to volunteer.



## **PERSONAL STATEMENT:**

Please complete as fully as possible, continue on <u>one</u> separate sheet only if necessary

Please provide further details of any personal qualities, skills, experience and knowledge that you think would make you a 'good volunteer'.

*If applying for a specific role, please specify and describe how your skills, experience and personal qualities relate to the role requirements, as attached in the Role Description.	,
Data il anno antici anche discitable a chi anno antici	
Detail any social or charitable achievements :	
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.	е
Full Name :	
Address :	
Phone Number : E-Mail :	
In what capacity does this person know you?	
Full Name :	
Address :	
Phone Number : E-Mail :	
In what capacity does this person know you?	



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Do you hold a full and current driving licence?	Yes No						
Have you any endorsements on your driving license?	Yes No						
If yes, please give further details :							
Do you consent to a DBS Disclosure being undertaken?	Yes No						
Do you know any member of Age UK Plymouth staff?	Yes No						
If yes, please give the person's name and their relationship to you :							
Do you require any additional support if selected for interview?  Yes  No							
If yes, please give further details:							
If you have been convicted of any offence, this MUST be disclosed (ur Offenders Act, 1974). Failure to do so could result in the volunteer relabrought to an end.  DECLARATION:							
All the information I have given here is true and according to all this information for considering my volunteer application for a volunteer role  - It will be treated confidentially at all times  - If I am successful it will form part of my volunteer role  - If I am unsuccessful I consent to the information to suitable future roles that might become available (destroyed immediately)	records o be kept for 6 months for any						
Signature : Date :							

