# VOLUNTEER APPLICATION FORM

As one of the largest voluntary sector organisation in the borough working with & for older people, Age UK Richmond upon Thames offers a wide range of services including information and advice, practical help around the home, educational, physical and social activities in our centres as well as in a variety of different venues across the borough. We welcome enthusiastic volunteers who want to share their skills and experience to volunteer with us.

## A. PERSONAL DETAILS

|  |
| --- |
| Title: Name: |
| Address:Postcode: |
| Telephone: Home: Mobile: |
| Email address: |
| Date of birth: |
| Emergency contact name:  Relationship to you:  Emergency contact number: |

**B. STATUS (please tick which applies)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Unemployed |  | Student |  | Retired |  |
| Working part-time |  | Working full time |  | Long term sick or disabled |  |
| Other | | | | | |

## C. BACKGROUND DETAILS

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| --- |
| Outline any skills, interests, hobbies, previous experience you have gained in the last 10 years either through work, volunteering, community work or caring for family members. (This helps to give us a general idea of the sort of experiences you have had and the skills that this will have given you. Please give as much detail as possible). |
| How much time do you have available for volunteering?(Please indicate times/days that are normally convenient for you) |
| Do you have a preference for which part of the Borough you volunteer in? |
| What sort of volunteering are you interested in? For example - social centres, IT, handyperson service etc. Please also let us know if you have a particular skill or experience that might be of interest to us. |
| Do you own a car with a valid driving licence? Y / N Are you able to use it for volunteering purposes if required for your role Y / N |
| Are you fluent in any languages other than English? Y / N If yes, which languages spoken:  Would you be willing to help with translation for a client if ever required? Y / N |

**How did you find out about volunteering with Age UK Richmond upon Thames?** Please tick any boxes that apply below:

|  |  |  |  |
| --- | --- | --- | --- |
| Word of mouth |  | Age UK Richmond member/volunteer/staff |  |
| Press advert |  | Newspaper article |  |
| TV/Radio |  | Social media – Twitter / Facebook |  |
| Website – which one |  | Newsletter or email |  |
| Leaflet |  | Poster |  |
| Community notice board |  | Richmond Council for Volunteering Service (RCVS) |  |
| Talk/Presentation |  | Local event |  |
| Other(please give details | | | |

**What are your reasons for volunteering?**

|  |  |  |  |
| --- | --- | --- | --- |
| To gain work experience |  | To get involved in the community |  |
| To develop new skills |  | To make new friends |  |
| To build confidence |  | To maintain existing skills |  |
| Any additional reasons or comments? | | | |

## D. YOUR HEALTH

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| --- |
| In order that we may offer you appropriate support in your volunteer role, please advise us of any health problems, disability or a medical condition that you think may affect the type of volunteering that you can do. |

**E. REFERENCES**

In both the interests of yourself and of the people with whom you will be working, we require a reference from two referees who have known you for at least two years. These referees MUST NOT BE FAMILY MEMBERS.

At least one referee should be a professional contact with a formal organisational email address (i.e., not @gmail.com or @yahoo.com addresses). If you do not have employment experience, a college tutor or other voluntary service supervisor’s details may be given.

Please ensure your referees know they will be contacted and that your application cannot proceed without their return.

|  |  |
| --- | --- |
| 1st Referee  Name |  |
| Address |  |
| Postcode |  |
| Telephone No. |  |
| Email Address |  |
| In what capacity has the referee known you and for how long? |  |

|  |  |
| --- | --- |
| 2nd Referee  Name |  |
| Address |  |
| Postcode |  |
| Telephone No. |  |
| Email address |  |
| In what capacity has the referee known you and for how long? |  |

## F. WORKING WITH VULNERABLE PEOPLE

**Disclosure & Barring Service and Rehabilitation of Offenders Act**

Age UK Richmond is of the opinion that the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 as amended (the “Exceptions Order”) applies to its activities/roles as our work involves contact with vulnerable people. Applicants must therefore declare all past criminal convictions whether spent or unspent.

A criminal record will not necessarily be a bar to volunteering within Age UK Richmond. All information supplied by candidates will be treated confidentially and we reserve the right to make further enquiries before reaching a decision on the application.

Do you have a criminal conviction or have you ever received a caution, reprimand or final warning and/or convictions, including those that are spent:

Yes ☐ No ☐

If yes please provide details of all criminal convictions, cautions, reprimands or final warnings below, including those that are spent:

|  |
| --- |
| As a charity working with vulnerable older people we have a duty of care towards our clients. We may be required to carry out a DBS check for this reason.  Please indicate if you are happy for this to take place?  Y / N  Do you have a current up to date DBS certificate registered with the Update Service?  Y / N |

##### H. DECLARATION

|  |
| --- |
| I declare that the information on this form is true and correct to the best of my knowledge.  Signed………………………………..…………  Date…………………………………………….. |

**Please email this completed form to kay.bascombe@ageukrichmond.org.uk**

**Alternatively, you can post it to Volunteer Coordinator, Age UK Richmond, The White House Community Centre, 45 The Avenue, Hampton, TW12 3RN**