Thank you for your interest in becoming part of our volunteering team at Age UK Sheffield. Volunteers play an important part in supporting over 12,000 older people each year, and there are lots of ways you can get involved. This form provides us with the information we need about your skills, interests and availability to help us find the right role for you.

Please complete this form and return it to volunteering@ageuksheffield.org.uk or:

Age UK Sheffield, South Yorkshire Fire & Rescue, 1st Floor, 197 Eyre Street, Sheffield, S1 3FG

Please contact us on 0114 250 2850 if you have any questions.

**PERSONAL DETAILS**

|  |  |
| --- | --- |
| Name:  | Telephone: |
| Address:  | Email address: |
| Date of Birth: |
| Transport *(walk, public, car)*: |
| Sex/Gender: | Ethnicity:  |
| Do you have any medical conditions that could affect the role you are applying for? *If yes, please provide details* |
| **Where did you hear about volunteering with Age UK Sheffield?** |
| ⃝ Word of mouth | ⃝ Age UK Sheffield Website | ⃝ Internet site – which one? |
| ⃝ Social Media (please specify) | ⃝ Sheffield University of/Hallam | ⃝ Event |
| ⃝ Leaflet or poster | ⃝ Voluntary Action Sheffield VAS | ⃝ Other (please specify) |

**EMERGENCY CONTACT DETAILS**

|  |  |
| --- | --- |
| Name: | Relationship to you: |
| Address: | Phone number: |

**VOLUNTEER ROLES**

Please tick the volunteering role(s) you are interested in. You can find more information about each role on our website [www.ageuk.org.uk/sheffield/get-involved/volunteer/](http://www.ageuk.org.uk/sheffield/get-involved/volunteer/), or contact us at enquiries@ageuksheffield.org.uk.

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| **DEMENTIA SUPPORT** |
|  | **Wellbeing Centre**Help to provide stimulating and enjoyable activities for older people with memory loss.*When/Where? Monday to Friday in Norfolk park (S2)* *Mondays, Tuesdays, Wednesdays, Thursdays in Hillsborough Park (S6)* *Mondays at Clifford House (S11)* *Fridays in the Botanical Gardens (S10)*  |
|  | **Dementia Café**Roles involve serving refreshments, taking part in activities (e.g. craft, puzzles, singing) and chatting to our clients and their carers.*When/Where? 1st and 3rd Tuesday of the month 2-4pm in Dore (S17)**1st and 3rd Thursday of the month 2-4pm in Bents Green (S11)* |
|  |  |
| **RETAIL / CHARITY SHOPS** |
|  | **Front of House**Roles involve helping customers, operating the till, creating window displays, etc*When/Where? Monday to Saturday in either Broomhill (S10), Bradway (S17) or Abbeydale Abbeydale Rd (S7) or Banner Cross (S11)* |
|  | **Back of House**Variety of roles, e.g. steaming, sorting and preparing donations, stock management*When/Where? Monday to Saturday in Broomhill (S10), Bradway (S17) or Abbeydale Rd (S7) or Banner Cross (S11)* |
|  |  |
| **BEFRIENDING** |
|  | **In Touch Service** Visit an older person who is lonely and/or isolated*When/Where? Flexible, City-wide* |
|  | **Telephone Befriender** Call an older person who is lonely and/or isolated*When/Where? Flexible, City-wide* |
|  |  |
| **OTHER ROLES** |
|  | **Digital Support**Visit older clients to show how to use their phone/laptop/camera etc. Help with fairly basic tasks such as showing people how to download photos or set up their skype to help them keep in touch with family and friends etc.*When/Where? Flexible, City-wide* |
|  | **Leaflet Distributor**Distributing leaflets/literature to a variety of venues around Sheffield to raise awareness of our services *When/Where? Flexible* |
|  | **Fundraiser**Set up your own fundraising event: sponsored run, pub quiz, coffee morning, etc*When/Where? Flexible* |

**RELEVANT SKILLS AND EXPERIENCE**

Please tell us why you are interested in the role/roles you have selected and how you would use your previous experience and skills within the role. If you are interested in Porter Valley please also include a list of your interests/hobbies.

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**REFERENCES**

Please provide the names and details of two people who can provide character references for you. One should preferably be a manager or colleague from your current or most recent paid or voluntary work. The second may be someone who knows you well e.g. teacher, key worker, family member, social worker, neighbour.

|  |  |
| --- | --- |
| **PROFESSIONAL REFERENCE** | **PERSONAL REFERENCE** |
| Name: | Name: |
| Address: | Address: |
| Telephone: | Telephone: |
| Email: | Email: |
| Relationship to you: | Relationship to you: |

**DECLARATION OF CRIMINAL RECORDS AND DISQUALIFICATIONS**

Please give details of any criminal convictions, caution or warning you have, including those normally considered as spent under The Rehabilitations of Offenders Act (1974) including date of conviction. Please note that applications are treated individually and that having any criminal convictions will not necessarily disqualify you from volunteering. All volunteer roles require a DBS (Disclosure and Barring Service) check.

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| --- | --- |
| PRINT NAME |  |
| SIGNATURE |  |
| DATE |  |