# **Age UK Wandsworth**



# **Volunteer Application Form**

**Your details** ***(please complete in BLOCK CAPITALS)***

|  |  |
| --- | --- |
| Mr  Mrs  Ms  Miss  Otherplease state |  |
| First Name | Surname |
| Address | Occupation |
| Postcode | Date of birth  /  /  (DD/MM/YY) |
| Home telephone Mobile telephone Email Address Twitter Name | If you have a car and are happy to use it for volunteering: **Yes**  **No**  Type of car? **2 door**  **4 door**  Do you have a current and clean driving licence? **Yes** **No** |
| **Languages spoken (excl. English)** | |

#### **Volunteer Opportunities**

Please tell us which roles you would like to apply for (please tick all that apply)

|  |  |
| --- | --- |
| **Be a Friend** - Home Visiting (wkday/wkend) | **Telephone Befriending**- (wkday office based) |
| **Out & About** - (wkday/wkend) | **Reception**- (wkday office based) |
| **Home from Hospital**- (wkday 9am – 5pm) | **Admin**- (wkday office based) |
| **Handyperson** - (wkday 9am – 5pm) | **Advice and Support**- (wkday office based) |

*NB: If you are unsure about what to apply for you can discuss this at your interview*

**When are you free to volunteer?** ***(please tick as appropriate)***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Mon (am)** | **Tue (am)** | **Wed(am)** | **Thu (am)** | **Fri (am)** | **Sat (am)** | **Sun (am)** |
| **Mon(pm)** | **Tue (pm)** | **Wed(pm)** | **Thu (pm)** | **Fri (pm)** | **Sat (pm)** | **Sun (pm)** |
| **Mon(eve)** | **Tue (eve)** | **Wed(eve)** | **Thu (eve)** | **Fri (eve)** | **Sat (eve)** | **Sun (eve** |

# **How did you hear about Age UK Wandsworth?**

|  |  |  |
| --- | --- | --- |
| Word of mouth | As an Age UK client | Local Paper  (please state which) |
| Poster (please state where) | Leaflet (please state where) | Internet Search |
| Passing the office | A talk you attended | A display you saw  (please state where) |
| Streetlife | Other (please state) | Twitter  Facebook |

**Emergency Contact details** (who we should contact on your behalf in case of emergency) ***(please complete in block capitals)***

|  |  |
| --- | --- |
| First Name | Surname |
| Address | Home telephone  Mobile telephone |

|  |
| --- |
| **Have you ever been convicted of a crime, cautioned, warned or reprimanded in the UK or in any other country including all unspent convictions? Yes**  **No**  (If yes, details will be required from you on a separate sheet (all information will be treated in the strictest of confidence). This will not necessarily prevent you from volunteering.  *The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found on the Disclosure and Barring Service website.*  **We may require a Disclosure & Barring Services check. Do you give your permission for Age UK Wandsworth to carry out this check? Yes**  **No** |
| **Do you have a disability or any health problems which may affect your ability to volunteer?**  (If so please give details. All information will be treated in the strictest of confidence) **Yes**  **No** |
| **For Non EU residents:**  Do you have a work permit, a visa or entry clearance? **Yes**  **No**  Are you a refugee or asylum seeker? **Yes**  **No** |

**About you:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| What are your reasons for applying to volunteer with Age UK Wandsworth?   |  |  |  |  | | --- | --- | --- | --- | | **Community involvement** |  | **Passionate about the cause** |  | | **Work Experience** |  | **Develop / maintain skills** |  | | **Make new friends / meet people** |  | **I have spare time** |  |   **Additional reasons or comments:** |
| **Please tell us about any relevant skills, qualifications or experience you have (this could be from paid work, volunteering, education or caring for a relative or friend)** |
| **Please tell us about any interests or hobbies that you have. (This may be useful for matching visiting volunteers with clients).** |
| **Please tell us if you have been bereaved recently. (This may be relevant depending on the nature of the volunteer role that is chosen).** |

**References (these will be written not verbal):**

Please provide details of two people who are willing to act as your referees. **Your referees must not be a partner or family member and should have known you for at least one year.** To avoid postal delays please supply email addresses where possible.

Reference 1:

|  |  |
| --- | --- |
| Name of referee: | Relationship to you (eg. Employer, friend, colleague etc.) |
| Postal address of referee: | Email address of referee: |

Reference 2:

|  |  |
| --- | --- |
| Name of referee: | Relationship to you (eg. Employer, friend, colleague etc.) |
| Postal address of referee: | Email address of referee: |

**Declaration:**

* The information given on this form is correct to the best of my knowledge, and if anything changes I will inform Age UK Wandsworth as soon as possible.
* I agree to meet with both the Volunteering Manager and the relevant Project Coordinator, and complete a CRB Disclosure form before a decision can be made on my application.
* I accept that the information given on this form can be stored both manually and electronically for the purpose of maintaining volunteer records.

**Signed:**  **Date: **

Please return completed form to: [volunteering@ageukwandsworth.org.uk](mailto:volunteering@ageukwandsworth.org.uk) or

Volunteer Coordinator, Age UK Wandsworth, 549 Old York Rd, Wandsworth, London, SW18 1TQ