



South Brent & District Caring Volunteer Application Form

Name

Date of Birth

Address

Postcode

Tel. No: (day)

Te. No:(evening)

Mobile:

Email:

Present occupation (if applicable)

Previous occupation(s)

Previous volunteer experience if applicable:

Do you have a vehicle available?

What skills or experiences can you bring to South Brent & District Caring ?

What areas of work are you interested in ? Please tick any or all

Working with clients?

Training?

Income generation and Fundraising?

Public relations?

Any other? Please specify

How did you hear about South Brent & District Caring ?

Availability and time commitment

When are you available for volunteering?

On a weekly basis

On a fortnightly basis

For one -off events

Are you normally available during:

Daytime

Evenings

Weekends

Flexible

REFEREES: It is likely that in your voluntary work with South Brent & District Caring you will come into contact with vulnerable people. We would, therefore, like to take up references from two people who have known you for some time and who are not related to you. If you have previously volunteered it would be good to have one from that organisation or place of work.

1st Referee

Name

Address

Tel. No.

Email address

How long has this person known you,
and in what capacity ?

2nd Referee

Name

Address

Tel. No.

Email address

How long has this person known you,
and in what capacity ?

Criminal Records Bureau Disclosure

Are you prepared to undergo a CRB check ?

Yes / No

If you have any queries about completing this form, please contact Sue Burgess on 01364 73324 or email South Brent Caring (**can't remember email address !**)

Please return your completed form to South Brent & District Caring, The Old school Community centre, Totnes Road, South Brent

For monitoring purposes please complete the Equal Opportunities form

Equal Opportunities in Recruitment & Selection

Our volunteer recruitment processes are carried out in such a way that people are selected purely on their suitability for the role. No volunteer will receive less favourable treatment on the grounds of sex, marital status, disability, race, ethnic origin, nationality, age, sexual orientation, religious belief or political opinion, or be disadvantaged by conditions or requirements that are not justified or relevant to the role. We are committed to ensuring that every applicant applying for a volunteer role with South Brent & District Caring is treated fairly.

We will treat the information you give us as confidential and appreciate your cooperation. Your application will not be affected by the information provided.

Do you consider yourself to have a disability? Yes/ No

The Disability Discrimination Act 1995 defines a disabled person as someone with a physical or mental impairment, which has substantial and long-term adverse effect on their ability to carry out day-to-day activities.

Do you have any health issues that it would be helpful for us to know about ?
(e.g. epilepsy, diabetes or angina) Please outline briefly.

What is your ethnic group ?

- White
- Mixed
- Asian or Asian British
- Black or Black British
- Chinese or other ethnic group(please specify)

**I confirm the information I have supplied on this form
is accurate and complete.**

Signed.....

Date.....