

Title



Age



Surname







VOLUNTEER APPLICATION FORM

PERSONAL DETAILS

Date of birth				First n	ames						
Home Address						Mobile Numbe					
	_						Landli Numb				
Email	Post	code									
Preferred	Meth	od of	Commu	nication	(please	tick	c)				
Post			Text		Mobile	•		Landlin	е	Email	
EMERGEN	ICY C	ONTA	СТ								
Name							Contact	Number			
					OLUNT	ΓEE	RING				
	What would you like to achieve through volunteering with H4AII?										
How did you hear about our organisation?											
Is there a specific organisation or role that you would like to apply for?											
Are there any organisations you would prefer not to volunteer with?											
How long can you volunteer for?											
(Some roles require a 6+ month commitment.) If offered a volunteer role, when are you											
available to start?											
How man	y hou	rs a w	eek can	you vol	unteer f	or?					

Please tick the sessions you would be available to volunteer for:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

SKILLS/ QUALIFICATIONS/ COURSES

Please list any relevant skills, qualifications or courses you have completed which may be relevant to the type of voluntary role you wish to undertake				

HOBBIES/INTERESTS

Please list any hobbies or interests					

ELIGIBILITY AND CONSENT

Please confirm that you have checked your eligibility and are	Yes	N	lo	
eligible to volunteer in this country in accordance with the relevant				
legislation.				
Please confirm that you are happy for us to store your information	Yes	N	lo	
for volunteer purposes.				
Please confirm that you are happy for us to share your information	Yes	1	lo	
with our partner charities and/or other organisations for volunteer purposes only.				
Please confirm that you are happy to receive our regular newsletter	Yes		lo	
and any updates we feel may be relevant?		-		



CRIMINAL CONVICTIONS

The Rehabilitation of Offenders Act 1974 makes it unlawful for employers, or prospective employers, to take into account offences deemed to be rehabilitated i.e. *spent*. We only ask prospective employees or volunteers to provide details of convictions and cautions that we are legally entitled to know about. Please note that a conviction will not necessarily exclude you from volunteering, but it will be taken into consideration when accessing your suitability.

For Volunteering in Administrative roles				
Do you have any criminal convictions other than those which are spent under the terms of the Rehabilitation of Offenders Act 1974?	Yes	No		
For Volunteering in roles involving vulnerable adults or involving children				
Under the Exceptions Amendment 1975 (as amended in 2013) and Order 2000, do you have any spent or unspent criminal convictions?	Yes	No		
For regulated roles (unsupervised contact with vulnerable adults and/or children)				
Have you recently completed an enhanced disclosure with full barring check?	Yes	No		

EQUALITY AND DIVERSITY MONITORING

Do you	u consider yourself to ha	ıve a disa	bility or health cond	tion?	
Yes	Please tell us about any access requirements or support needs you may have (e.g. large print, induction loop, wheelchair access etc.)			No	Prefer not to say
Gende	r				
Male		Female		Prefer not say	to
Ethnic	14			Prefer not	4
	ारप्र			Freier not	to
Ethnic	origin is not about nationa	• •	•	say	to
Ethnic	_	• •	•		to
Ethnic	origin is not about nationa	• •	•		to
Ethnic	origin is not about nationa	• •	•		to
Ethnic	origin is not about nationa	• •	•		to
Ethnic	origin is not about nationa	• •	•		to



REFERENCES

Please give details of <u>TWO</u> referees who have known you <u>for at least 1 year</u>. Please do **NOT** include relatives. We cannot accept applications without this information. **All fields** required.

Name of Referee 1	Name of Referee 2
In what capacity does this person know you?	In what capacity does this person know you?
Role or Job Title (if applicable)	Role or Job Title (if applicable)
Address	Address
Postcode	Postcode
Email	Email
Telephone Number	Telephone Number

DECLARATION

The information that I have provided within this application form is accurate.				
Signed				
Date				

Thank you for your interest. Please return your completed form to:

Email: Volunteerhub@H4All.org.uk

Post: H4All Volunteer Hub, Key House, 106 High Street, Yiewsley, Middlesex, UB7 7BQ

PRIVACY POLICY

H4All complies fully with current General Data Protection Regulation. For further details, please refer to our privacy policy which can be found on our website www.h4all.org.uk. If you wish to receive a paper copy, please email your request to yolunteerhub@h4all.org.uk.

