



VOLUNTEER APPLICATION FORM

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS

Name:		Male / Female (delete as appropriate)	
DOB:	Place of Birth (Town and Country)		
Address: Post Code			
Email address:			
Telephone		Mobile	
Do you have your own transport:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you currently a student?	Yes <input type="checkbox"/>	(full or part time)	No <input type="checkbox"/>
Are you currently employed?			
If yes, where and in what capacity:			
.....			
.....			
Please give your NI No:			
Have you previously served with the armed forces?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have a disability?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
(If yes please give details):			
.....			
Please give a summary of your past work experience:			
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.....			
Please give a summary of your previous voluntary work, if any:			
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.....			

Describe any skills experience that you would be willing to share with the Client Group – (Sports, Craft, Welfare related knowledge):

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How do you think you could benefit from being a volunteer?

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Any other information which you consider relevant (i.e. hobbies and interests)

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How did you learn about us? (VANEL/Press/Word of Mouth/Other source)

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Are you available for a 2 Day Induction Programme? Yes No

Do you have a minimum of 1/2 day free per week that you can spend with clients? Yes No

Please give the name, address and telephone number of two referees (Employment/Volunteer Work/Working within a Group, related reference)

Name:

Address:

.....

.....

Telephone:

E-mail:.....

Name:

Address:

.....

.....

Telephone:

E-mail:.....

Please note: You will be required to complete an disclosure DBS form (formally enhanced CRB form) . This position is exempt from the Rehabilitation of Offenders Act 1974 as duties will include working with vulnerable adults and/or children. All disclosures will be dealt with confidentially and would not necessarily preclude an applicant from volunteering. Humbercare will fund this application.

Please return to: Humbercare Ltd
 81 Beverley Road
 Hull
 HU3 1XR

Telephone: 01482 586633
Fax: 01482 586825
Email: info@humbercare.org.uk