**Volunteer Application Form**

*Please provide your FULL name, as detailed on your birth certificate.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname:** |  | **Title:** |  |
| **Forename:** |  **Any middle name(s):** |
| **Address:****Post Code:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Telephone – Home:** |  | **Mobile:** |  |
| **Email:** |  |
| **Date of Birth:** |  | **Car driver?:** | **Y/N** | **Use of a car?** | **Y/N** |
| **How did you find out about voluntary work with us**? e.g. Google, word of mouth, Age UK website, national media? |  |

|  |
| --- |
| **Status** *(please tick)* |
| Unemployed |  | Student |  | Retired |  |
| Working part-time |  | Working full-time |  | Other |  |

|  |  |
| --- | --- |
| **When would you be available for interview and training?**  |  |

**Please note if you are under 18 years of age, Age UK Bury will need to have the agreement of your parent/guardian before placing you. If you, the volunteer applicant, could be considered to be a vulnerable adult, we may need to consult with an appropriate professional person who knows you well before proceeding with your application.**

|  |
| --- |
| **Please tell us if you feel there is any additional support you may need to help you volunteer or any health conditions that we need to be aware of e.g. wheelchair access or significant allergies.** |
|  |

|  |
| --- |
| **Details of the person you would like us to contact in case of an emergency:-** |
| **Name:** |  |
| **Address:** |  |
| **Telephone:** |  |
| **Email:** |  |
| **Relationship to you:** |  |

*(Completing the following questions below is optional. This assists Age UK* Bury *to monitor the effectiveness of our Equal Opportunities policy and details are strictly for confidential statistical purposes only)*

**Ethnic group**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Asian British | 🞎 | White British | 🞎 | Japanese | 🞎 |
| Bangladeshi | 🞎 | Chinese | 🞎 | Other Asian background | 🞎 |
| Black African | 🞎 | European | 🞎 | Other black background | 🞎 |
| Black British | 🞎 | Indian | 🞎 | Other dual heritage | 🞎 |
| Black Caribbean | 🞎 | Irish | 🞎 | Do not wish to disclose | 🞎 |

Other (*please specify)*: ……………………………………….

**ALL ABOUT YOUR INTEREST IN VOLUNTEERING**

|  |
| --- |
| **Why you would like to join Age UK Bury** **as a volunteer?** (This information will help us plan your volunteering experience better.) |
|  |

|  |
| --- |
| **Please detail any qualifications, skills, experience, interests and languages.** |
|  |

|  |
| --- |
| **What days/times would you be available?** |
|

|  |  |  |
| --- | --- | --- |
|  | Morning | Afternoon/ Evening |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |
| Saturday |  |  |
| Sunday |  |  |

 |

|  |
| --- |
| **How much time do you think you could commit to volunteering per month?** |
|  |
| **What times will you not be available, e.g. other commitments, long holidays, etc?** |
|  |

**Which of the following activities might you be interested in helping with:**

*Please tick or put a number in order of interest.*

*Please note, most roles take place* ***during weekday mornings and afternoons.***

|  |
| --- |
| **The Befriending Service** needs volunteers to visit isolated, elderly individuals in their homes on a regular basis. **\* can also be done weekday evenings and/or weekends** **Telephone Befriending Volunteers,** needed to phone isolated or at least once a week.Volunteers can either work from home or up at the Jubilee CentreWe need **Volunteer Drivers** to help give lifts to older people to enable them to attend events and cluster groups. |

**Please supply the name and contact details of two referees**

They should not be a family member and should have known you for at least two years

If your circumstances mean that you are unable to provide details of referees we will be happy to discuss this further with you.

Please note an email address is preferable, (or if not available, a full postal address will be acceptable.

|  |  |
| --- | --- |
| **1st Referee** | **2nd Referee**  |
| **Name:** |  | **Name:** |  |
| **Email:** |  | **Email:** |  |
| **Address:** |  | **Address:** |  |
| **Tel No:** |  | **Tel No:** |  |
| **What is their relationship to you?** (e.g. former employer, friend, other) | **What is their relationship to you?** (e.g. former employer, friend, other) |
|  |  |
| **How long have they known you?** | **How long have they known you?** |
|  |  |

**DBS (Disclosure and Barring Service) checks**

|  |
| --- |
| **The befriending volunteer roles are eligible for a DBS (Disclosure and Barring Service) check – formerly known as a Police Check. These positions are included in the Rehabilitation of Offenders Act (ROA) 1974 (Exceptions) Order 1975 and organisations are entitled to ask an exempted question for which the applicant is required to answer.** **If you are applying for one of these roles, please answer the following question:** |
| Do you have any convictions, cautions, reprimands or final warnings which would not be filtered in line with current guidance?  | YES / NO |
| If yes, please give details: …………………………………………………………………………………………………………..…………………………………………………………………………………………………………..*The amendment to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are ‘protected’ and are not subject to disclosure to employers, 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.* [*https://www.gov.uk/government/publications/dbs-filtering-guidance*](https://www.gov.uk/government/publications/dbs-filtering-guidance) |
| If we require a DBS check, do you give your permission for us to carry out a check? (DBS checks are free for volunteers) | YES / NO |
| Have you had a relevant DBS check for working with vulnerable adults carried out in the last 3 years and logged with the DBS update service? | YES / NO |

**GDPR (General Data Protection Regulation)**

We need to collect personal information about you in order to process your application form. It will also form the basis of a confidential personal record in electronic format and initially in paper format. The data will be retained for administrative and statistical reporting purposes.

In accordance with the General Data Protection Regulation and Data Protection Act, the information provided on this form will only be disclosed to those who have a legitimate reason to see it.

The lawfulness of processing this information under the General Data Protection Regulation 2018 and the Data Protection Act is for Legitimate Purposes 6(f) and in compliance with legal obligations 6(c).

A copy of our Privacy Notice is available on our website at **www.ageukbury.org.uk** or on request by calling **0161 763 9030.**

Age UK Bury from time to time, may take photographs and film to use in their publications, printed material, social media and other forms of digital/printed material, solely for the purpose of promoting Age UK Bury’s services and communication with its stakeholders. If you do not wish this to happen, please let us know.

***Please tell us your preferred method(s) of communication for general Age UK Bury updates by ticking where appropriate:***

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Email | 🞎 | Landline | 🞎 | Mobile | 🞎 | Post | 🞎 | Answerphone message | 🞎 |

If you would like to access a copy of the data we hold, please put the request in writing to the email/ address below. Your request will be processed within 30 days. You will not have to pay a fee to access your personal information. However, we may charge a reasonable fee if your request for access is unfounded or excessive. Alternatively, we may refuse to comply with the request in such circumstances.

You can change your mind at any time and ask for your consent to be withdrawn by calling us on 0161 763 9030, emailing **admin@ageukbury.org.uk** or writing to Age UK Bury, the Jubilee Centre, Mosley Avenue, Bury, BL9 6NJ

|  |
| --- |
| **VOLUNTEER DECLARATION****I declare the above information is, to the best of my knowledge, correct.** |
| **Signature:** |  | **Date:** |  |