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**VOLUNTEER APPLICATION FORM**

This form is to be completed for volunteering opportunities at Age UK Northamptonshire

*(not for Volunteer Community Responders)*.

Please kindly fill out the below information and we will be in touch.

**EQUAL OPPORTUNITIES MONITORING FORM**

In accordance with its policy on equal opportunities, the Charity will provide equal opportunities to any Volunteer applicant and will not discriminate either directly or indirectly on the grounds of race, colour, ethnic origin, nationality, national origins, sex, sexual orientation, religion or belief, marital status, age or disability.

In order to assess how successful this policy is we have set up a system of monitoring all Volunteer applications. We would, therefore, be grateful if you would complete the questions on this form. All information will be treated in confidence and will only be shared with relevant personnel.

|  |  |  |  |
| --- | --- | --- | --- |
| How did you hear about us? |  | Please enter today’s date: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| First Name: |  | Surname: |  |
| Date of Birth: |  | Gender: |  |
| Ethnicity: |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Address: |  | | |
| Mobile Phone: |  | Home Phone: |  |
| Email Address:  **(Please supply)** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| First Language: |  | Other Languages Spoken: |  |

**VOLUNTEERING OPPORTUNITIES**

**Which opportunities are you interested in? Please do NOT tick all.**

|  |  |
| --- | --- |
| **Role** | **Mark with ‘X’** |
| **Telephone Befriending friendly weekly telephone calls to local older people from the comfort of your own home within office hours.** |  |
| **Day Centre Rockingham Road Baptist Church (rear of building), Rockingham Road, Kettering, NN16 9JA (Mon-Fri Student Placements only)** |  |
| **Day Centres at The Venton Centre, York Road, Northampton, NN1 5QJ**  **(Mon-Fri)** |  |
| **Charity Shop Burton Latimer, 14 Churchill Way, NN15 5RU**  **(Mon-Fri)** |  |
| **Charity Shop Kettering, 62 Stamford Road, NN16 8LL**  **(Sat only)** |  |
| **Charity Shop Kingsthorpe, 14 Alexandra Terrace, NN2 7SJ**  **(Mon-Fri)** |  |
| **Charity Shop Higham Ferrers, 28 High Street, NN10 8PA**  **(Sat or Sun)** |  |
| **Charity Shop Northampton, 18 St. Giles Street, NN1 1JA**  **(Wed & Thurs AM)** |  |
| **Minibus Escort**  **(Mon-Fri, 4 hrs per day 8.30-10.30am and 2.30-4.30pm)** |  |
| **Vol. Drivers - must have D1 on licence/MIDAS training given**  **(Mon-Fri, 4 hrs per day 8:30–10:30am & 2:30–4:30pm)** |  |
| **Handyperson Service (various locations)** |  |
| **SPRING Supporters – to assist in group activities in community venues.**  ***Applications from SPRING members only.*** |  |
| **Fundraising** |  |

**DATA PROTECTION**

Information from this application may be processed for purposes registered by the organisation under the General Data Protection Regulation (GDPR) 2018. The GDPR gives you the right to request a copy of the information we hold about you. We want to make sure that your personal information is up to date so you can also request that this information is amended or deleted. If you would like a copy of the information we hold about you, please email or write to us at the address at the end of this form. We aim to comply with requests for access to personal information as quickly as possible and we will ensure we deal with requests within 1 month of receipt unless there is a justifiable reason for a delay.

**ASYLUM AND IMMIGRATION ACT 1996**

**PROOF OF LEGAL RIGHT TO LIVE IN THE UK**

Please indicate which of the following you are able to provide to prove your eligibility to live in the UK (please mark with an ‘X’):

|  |  |  |  |
| --- | --- | --- | --- |
| Valid European Union Passport |  | UK Driving Licence |  |

**DISABILITY DISCRIMINATION ACT 1995**

Please indicate if you have any special requirements to enable you to attend an interview:

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

Please provide details:

Please provide information of any medical conditions that might affect the type of volunteer work you could do:

Please use this space to outline experiences, skills and interests that could be used within your role as a Volunteer:

Please use the space below to notify the Volunteer Co-ordinator of any relevant details that may support your application. For Walking Befriending interest, let us know the location(s) you'd be interested in:

**REFERENCES**

Please provide the contact details of two Referees below and their email addresses if possible (supplying this often speeds up the application process). The Charity cannot accept references from family members.

Referee 1

|  |  |
| --- | --- |
| Name: |  |
| Email Address: |  |
| Phone Number: |  |
| Postal Address: |  |
| Relationship to you: |  |

Referee 2

|  |  |
| --- | --- |
| Name: |  |
| Email Address: |  |
| Phone Number: |  |
| Postal Address: |  |
| Relationship to you: |  |

**CRIMINAL CONVICTIONS**

Some voluntary and paid positions require the Charity to complete a Disclosure and Barring form (DBS). Please provide details of any convictions, cautions or reprimands or any proceedings being instituted against you. You may prefer to include details on a separate sheet and insert into a sealed envelope, marked for the attention of **Volunteer Co-ordinator**. All information is confidential and will be considered on an individual basis.

Please provide information of any criminal convictions that might affect the type of volunteer work you could do:

**I hereby give my consent to Age UK Northamptonshire processing the data supplied in this application form for the purpose of recruitment and selection.**

**I give my consent (please mark with an ‘X’):**

Thank you for your interest in volunteering with us.

Please return to:

Volunteers Co-ordinator, Age UK Northamptonshire,

The William and Patricia Venton Centre, York Road, Northampton, NN1 5QJ

Email: [volunteers@ageuknorthants.org.uk](mailto:volunteers@ageuknorthants.org.uk)

Registered charity number 1059995