

VOLUNTEER APPLICATION FORM

This form is to be completed for volunteering opportunities with 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 | Please enter today's |
|-----------------|----------------------|
| hear about us? | date: |
| | |
| First Name: | Surname: |
| Date of Birth: | Gender: |
| Ethnicity: | |
| , | |
| Address: | |
| Mobile Phone: | Home Phone: |
| Email Address: | |
| (Please supply) | |
| | |
| First Language: | Other Languages |

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) | |
| Admin – Human Resource Team, The Venton Centre, York Road, Northampton, | |
| NN1 5QJ (Wed or Thurs morning) | |
| Admin - Hospital Discharge & Community Team, Waterside House, Station Road, | |
| Irthlingborough, NN9 5QF (Thurs or Fri morning) | |
| 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) | |
| Charity Shop Thrapston, 38 High Street, NN14 4JH | |
| (Mon-Sat) | |
| 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 | |
|---|--|-----------|
| | | |
| DISABILIT | Y DISCRIMINATION ACT 1995 | |
| Please indicate if you have any special re | equirements to enable you to attend an interview: | |
| Yes No | | |
| Please provide details: | | |
| | | |
| | | |
| | | |
| Please provide information of any media you could do: | cal conditions that might affect the type of volunt | eer work: |
| | | |
| | | |
| | | |
| Please use this space to outline experier as a Volunteer: | nces, skills and interests that could be used within | your role |
| | | |
| | | |
| | ne Volunteer Co-ordinator of any relevant details Befriending interest, let us know the location(s) | |
| | | |
| | | |

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 <u>cannot accept references from family members</u>.

| Referee 1 | |
|---|---|
| Name: | |
| Email Address: | |
| Phone Number: | |
| Postal Address: | |
| Relationship to you: | |
| Referee 2 | |
| Name: | |
| Email Address: | |
| Phone Number: | |
| Postal Address: | |
| Relationship to you: | |
| (DBS). Please provide deta instituted against you. You envelope, marked for the abe considered on an individual | cositions require the Charity to complete a Disclosure and Barring form ils of any convictions, cautions or reprimands or any proceedings being may prefer to include details on a separate sheet and insert into a sealed ttention of Volunteer Co-ordinator . All information is confidential and will dual basis. of any criminal convictions that might affect the type of volunteer work |
| you could do: | of any criminal convictions that might affect the type of volunteer work |
| | |
| application form for the p | t to Age UK Northamptonshire processing the data supplied in this ourpose 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