

VOLUNTEER APPLICATION FORM

The completed form should be e-mailed to sbcvolunteers@volunteerslough.org.uk or returned to the Volunteer Centre, Slough Library, 85 High Street, Slough, Berkshire, SL1 1EA.

Application for the post of: Ref No:.....

PERSONAL DETAILS

First Name(s):..... Surname:.....
 Address:..... Home Tel. No:.....
 Daytime Tel. No:.....
 Mobile Tel. No:.....
 Email Address:.....

Please tick your employment status.

Employed Self employed Retired Unemployed Student Unable to work

Please take a few minutes to look through the following list. Please tick any areas of interest. The activities that you choose will help us match you with volunteering opportunities.

Football <input type="checkbox"/>	Aerobics <input type="checkbox"/>	Older People's Activities <input type="checkbox"/>
Netball <input type="checkbox"/>	Badminton <input type="checkbox"/>	Social Care <input type="checkbox"/>
Cricket <input type="checkbox"/>	Disability Sport <input type="checkbox"/>	Libraries <input type="checkbox"/>
Hockey <input type="checkbox"/>	Healthy Walks <input type="checkbox"/>	Administration <input type="checkbox"/>
Rugby <input type="checkbox"/>		One off Activities <input type="checkbox"/>

Please indicate which days and times you are available to volunteer.

Monday	Tuesday	Wednesday	Thursday	Friday
Morning <input type="checkbox"/>	Morning <input type="checkbox"/>	Morning <input type="checkbox"/>	Morning <input type="checkbox"/>	Morning <input type="checkbox"/>
Afternoon <input type="checkbox"/>	Afternoon <input type="checkbox"/>	Afternoon <input type="checkbox"/>	Afternoon <input type="checkbox"/>	Afternoon <input type="checkbox"/>
Evening <input type="checkbox"/>	Evening <input type="checkbox"/>	Evening <input type="checkbox"/>	Evening <input type="checkbox"/>	Evening <input type="checkbox"/>
Saturday	Sunday			
Morning <input type="checkbox"/>	Morning <input type="checkbox"/>			
Afternoon <input type="checkbox"/>	Afternoon <input type="checkbox"/>			
Evening <input type="checkbox"/>	Evening <input type="checkbox"/>			

Please give brief details of any previous voluntary or work experience.

Please give details of any other experience which you feel is relevant to the sort of voluntary opportunities you are looking at.

Please tell us briefly why you would like to volunteer.

DRIVING

Do you hold a current driving licence? Yes No

If yes do you have your own transport that you can use whilst volunteering? Yes No

Please note petrol expenses will be reimbursed if own transport is used whilst volunteering.

ONLINE REGISTRATION WITH THE DISCLOSURE & BARRING SERVICE (DBS)

1. Are you registered with the DBS online update service? Yes No

2. If yes, please indicate your consent for Slough Borough Council to check your clearance online prior and during your employment? Yes No

CRIMINAL CONVICTIONS

Do you have any unspent convictions, cautions, reprimands or warnings? Yes No

If yes please give full details.

EQUAL OPPORTUNITY MONITORING

Slough Borough Council is committed to equal opportunities. In order for us to monitor the effectiveness of our equality policy it would be helpful if you could provide the following information. This information is kept strictly confidential.

Date of Birth: Age:

Gender:

Ethnic Origin

A. White

- British
- Irish
- Other (please state).....

B. Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Other (please state).....

C. Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Sikh
- Other (please state).....

D. Black or Black British

- Caribbean
- African
- Other (please state)

E. Chinese or other ethnic group

- Chinese
- Other (please state)

F. I do not wish to provide this information

REFERENCES

All candidates – Please give details of two referees whom we may ask about your suitability for the volunteership. One of these should be your current or most recent employer. Referees must not be related to you. If you are a school/college leaver, please give the name and address of a head teacher/tutor and also the manager of your most recent work experience placement – if applicable. (Internal candidates: Please note your line manager must be one of the referees). We reserve the right to approach your current and any previous employer.

Reference 1 :

Name of referee:

Name & address of organisation:

Reference 2:

Name of referee:

Name & address of organisation:

Tel. No:	Tel. No:
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E-Mail:		E-Mail:	
Occupation:		Occupation:	
Capacity in which known to you:		Capacity in which known to you:	
Dates of employment: to (dd/mm/yyyy)		Dates of employment: to (dd/mm/yyyy)	
If you are called for interview, may we contact your referee?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If you are called for interview, may we contact your referee?	Yes <input type="checkbox"/> No <input type="checkbox"/>

DISABILITY DISCRIMINATION ACT 1995 AND 2005

The council wishes to encourage disabled people to apply for volunteer opportunities – all information will be treated in confidence.

Do you have a disability as outlined in the Disability Discrimination Act 1995 and 2005? (see General Information section within the job pack for detailed definition) Yes No

If yes, please state the type of disability you have:

In relation to any disability, do you have any particular requirements in order to attend an interview? Yes No

If yes, please give details :

DECLARATION

I certify that the information provided is true and accurate and in particular that I have not omitted any facts which may have a bearing on my application. I understand that any subsequent voluntary agreement with the Council will be made on the basis of the information I have provided. I understand that a false declaration which results in my appointment as a volunteer with the Council will render me liable to termination of my volunteer placement. I give explicit consent that the information which I give on this form may be processed in accordance with the Council's registration under the Data Protection Act 1998. I have not canvassed either directly or indirectly any officer or member of Slough Borough Council in connection with this volunteer placement.

I agree to Slough Borough Council carrying out recruitment screening relevant to my volunteer application.

Mark box to agree and sign below

Signature:

Date:(dd/mm/yyyy)