Volunteer Application Form

Thank you for your interest in volunteering for Talkthru. Please complete this form and return to the office at Talkthru.

The information you provide is strictly confidential. We welcome applications from people of all abilities, backgrounds and communities. Talkthru abides by the Data Protection Act 1998 and operates an Equal Opportunities policy.

Personal details

Title (Mr/Mrs/Miss etc.) ........................

Surname ..............................................

Forename**.**............................................ Male **** Female ****

Address ...........................................................................................................................................................

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Postcode**.**..................................

Telephone Home**.**................................................................ Mobile .............................................

Email .............................................................................. Date of birth .......................

Please tick this box if you would like to receive email communication about the future activities of Talkthru, via the email address you have provided ****

Emergency contact details

Who should we contact in an emergency?

Name .................................................................................................................................................................

Relationship to you

.................................................................................................................................................................

Address .................................................................................................................................................................

Telephone Home……………………………………………...Mobile…………………………………………..

Health

Do you have any health problems or disability of which we should be aware?

Yes **** No **** If yes, please give details

**.**.................................................................................................................................................................

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Employment status

Please tick the appropriate box. Are you...

In paid employment **** Unemployed **** Retired **** Student ****

Other (please give details) ...................................................................................................................................................................

Your volunteer role

How did you hear about volunteering for Talkthru?

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Why do you wish to volunteer, please specify which area? ..................................................................................................................................................................

Languages spoken/Skills/Qualifications ..................................................................................................................................................................

References

In order to protect the interests of Talkthru, we need to ask you to provide details of two referees who are not directly related to you by blood or by marriage and who have known you for at least two years.

|  |  |
| --- | --- |
| Name: | Name: |
| Address: | Address: |
| Postcode: | Postcode: |
| Telephone: | Telephone: |
| E-mail: | E-mail |
| How do you know this person? | How do you know this person? |

Criminal convictions

Do you have any criminal convictions or any pending? Yes **** No ****

If yes, please give details. A prior or pending criminal conviction may not prevent you from volunteering with Talkthru, but failure to disclose relevant information will result in immediate dismissal. This information will be kept in the strictest confidence.

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Personal declaration

I hereby apply to become a volunteer with Talkthru. I also agree to abide by all Talkthru policies and guidelines and understand that I have a responsibility for my own and others’ Health & Safety while volunteering with the charity. If accepted, I will abide by the principles of volunteering outlined in the charity’s Volunteering Policy. I agree that Talkthru may hold and use the data on this form for the purposes of administering and supervising my work with the charity and that such data may be available to those who reasonably need to know the same within the charity.

Print name Date

Signature

To be completed by Talkthru

I confirm that I have accepted the above person as a volunteer on behalf of Talkthru

|  |  |  |
| --- | --- | --- |
| Name | Job Title | Date |
| References checked **** | Interview **** | Form complete and signed by volunteer **** |