

GOLDEN YEARS - VOLUNTEER APPLICATION FORM

Please fill in all the sections of this form and return to goldenyears@spca.org.uk or at the address above.

| | |
|------------------------|--|
| NAME: | |
| ADDRESS: | |
| POSTCODE: | |
| HOME TELEPHONE: | |
| MOBILE: | |
| WORK TELEPHONE: | Can we call you at work? Please tick Yes <input type="checkbox"/> No <input type="checkbox"/> |
| EMAIL: | |

When are you available?

I am able to volunteer anytime during the week, or please tick any of the following boxes:

| | Mon | Tues | Weds | Thurs | Fri | Sat | Sun |
|------------------|------------|-------------|-------------|--------------|------------|------------|------------|
| Morning | | | | | | | |
| Afternoon | | | | | | | |
| Evening | | | | | | | |

What areas of volunteering are you interested in? Please circle

| | | |
|----------------------------------|--------------------------------|----------------------------------|
| Running group activities | Support telephone calls | Walking |
| Helping out in activities | Social groups | Health and wellbeing |
| Lunch/tea clubs | Arts and crafts | Café/pub lunches |
| Online groups | Singing | Day trips |
| Annual holiday (4 days) | Talks | IT/ social media training |
| Admin support | Reception support | Other (please state) |

Tell give your reasons for wanting to volunteer at Saint Pancras Community Association

Tell us about any volunteering experience or any relevant employment you have?

Do you have specialist skills, interests or hobbies that you would like to use when volunteering for us?

Are there any particular skills you would like to develop by volunteering with SPCA?

SPCA is committed to equal opportunities. So we can consider any appropriate adjustments to the volunteer environment, and better support you in your role, please give details below of any disabilities, health issues (e.g. bad back) or support needs.

As a volunteer working with SPCA you may be working with older people who may be frail and vulnerable.

Under the rehabilitation of Offenders Act 1974, do you have any unspent criminal convictions?

Yes No

If you have ticked yes, please write details on a separate sheet and attach to this form. Having a conviction will not necessarily stop you from volunteering, but it will need to be taken into consideration when assessing your suitability. For some roles, we reserve the right to request a Criminal Records Bureau Disclosure before work begins. Failure to disclose any criminal offences or Mental Health Act Orders could lead to your application as a volunteer being rejected or, if you are appointed, to your removal from our scheme of volunteers. Information will be held in confidence by SPCA.

References

As a standard part of our volunteer selection process, please provide the name and contact details of two people who are not family members and who are willing to act as referees for your voluntary work position. Ideally, one reference should come from an employer, former employer, tutor or volunteer organiser. We will make reference checks either by post, telephone or email.

Referee 1

| | |
|---------------------------------|--|
| Name | |
| Address | |
| Telephone | |
| Mobile | |
| Email | |
| Relationship to yourself | |

Referee 2

| | |
|---------------------------------|--|
| Name | |
| Address | |
| Telephone | |
| Mobile | |
| Email | |
| Relationship to yourself | |

I declare that the information contained in this application is true and correct. I certify that to the best of my knowledge, the information given on this form is correct. I have omitted nothing that, to the best of my knowledge, might affect this application; and I acknowledge that misleading statements may be sufficient for cancelling any agreements made.

Signature:

Date: