|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **VOLUNTEER APPLICATION FORM** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Full Name** | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Address** | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Postcode** | | | | |  | | | | | | **Tel No.** | | | |  | | | | | | | | | | | | | | | |
| **Email** | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Date of Birth** | | | | |  | | | | | | | | | | | | | | | **M/F** | | | | |  | | | | | |
| **Current Driving Licence** | | | | | **YES / NO** | | | | **Do you have access to transport?** | | | | | | | | | | | | | | | | | **YES / NO** | | | | |
| **Do you know anyone working or involved with Grace Womens Project? If yes, please provide details.** | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **WHAT VOLUNTEER ROLE(S) ARE YOU INTERESTED IN?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Trades Person / DIY Pro | |  | | | | | Creative Skills | | |  | | | | | | | Artist / Creative Professional | | | | | | | | | |  | | | |
| Musician / Music teacher | |  | | | | | Experienced Fundraiser | | |  | | | | | | | Therapist / Counsellor | | | | | | | | | |  | | | |
| Events Fundraiser | |  | | | | | Fundraising Supporter | | |  | | | | | | | Grace Ambassador | | | | | | | | | |  | | | |
| Church Partner | |  | | | | | Charity Board Member | | |  | | | | | | | Other | | | | | |  | | | | | | | |
| **RELEVANT QUALIFICATIONS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Qualification** | | | | | | **Level** – High School, SVQ, City & Guilds, Degree, Honours etc | | | | | | | **Year Gained** | | | | | | | | **Place of study** | | | | | | | | | |
|  | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | | |
| **RELEVANT SKILLS OR EXPERIENCE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **HEALTH** Provide details of health issues or conditions that may impact on your volunteer role. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **AVAILABILITY** Please mark availability with a X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **MONDAY** | | | **TUESDAY** | | | | **WEDNESDAY** | | | **THURSDAY** | | | | | **FRIDAY** | | | | | | | | **SATURDAY** | | | | **SUNDAY** | | |
| **Morning** |  | | |  | | | |  | | |  | | | | |  | | | | | | | |  | | | |  | | |
| **Afternoon** |  | | |  | | | |  | | |  | | | | |  | | | | | | | |  | | | |  | | |
| **Evening** |  | | |  | | | |  | | |  | | | | |  | | | | | | | |  | | | |  | | |
| How many hours on average could you commit to? | | | | | | | | | | | |  | | | | | | weekly or monthly | | | | | | | | | | |  | |
| **REFERENCES**  **(Please note that referees must have known you for a minimum of 1 year)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **Referee 1** | | | | | | | | | | | **Referee 2** | | | | | | | | | | | | | | | | |
| **Name** | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| **Address**  **Including Postcode** | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| **Telephone** | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| **Email** | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| Capacity in which they know you? | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| **HISTORY OF OFFENDING** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Have you had any criminal convictions?** | | | | | | | | | | | | | | **YES** | | | | |  | | | | | | | **NO** | | | |  |
| **Are you currently involved in a police investigation?** | | | | | | | | | | | | | | **YES** | | | | |  | | | | | | | **NO** | | | |  |
| If the answer to either of these questions is ‘Yes’, please provide details in a letter in a sealed envelope addressed to the Board Secretary marked ‘Private and Confidential’. All information is treated in the strictest confidence. **Involvement with the criminal justice system does not necessarily** **hinder your ability to volunteer.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Are you willing to undergo a PVG record scheme check?** | | | | | | | | | | | | | | **YES** | | | | |  | | | | | | | **NO** | | | |  |
| **HOW DID YOU HEAR ABOUT GRACE WOMENS PROJECT?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Social Media | |  | | | | | Website | | |  | | | | | | | Word of mouth | | | | | | | | | |  | | | |
| Careers/Job Centre | |  | | | | | Church / Place of worship | | |  | | | | | | | Grace Project staff | | | | | | | | | |  | | | |
| Other: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **REASONS FOR APPLYING FOR VOLUNTEER ROLE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Share Skills | |  | | | | | Gain experience | | |  | | | | | | | Increase confidence | | | | | | | | | |  | | | |
| Student Placement | |  | | | | | Give back to society | | |  | | | | | | | Gain new skills | | | | | | | | | |  | | | |
| Meaningful Use of Time | |  | | | | | Meet new people | | |  | | | | | | | Other | | | | |  | | | | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **SIGNED** |  | **DATE** |  |