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**St Werburghs Community Association**

**Volunteer Application Form**

**To join St Werburghs Community Centre as a volunteer.**

**Please complete this form and return it to** [**alison@stwerburghs.org.uk**](mailto:alison@stwerburghs.org.uk)

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| --- |
| Name: Click or tap here to enter text. |
| Address: Click or tap here to enter text. |
| Post code: Click or tap here to enter text. |
| Telephone: Click or tap here to enter text. |
| E-mail: Click or tap here to enter text. |

**Emergency Contact Details**

Please give details of someone we would be able to contact in an emergency while you are volunteering with us.

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| --- |
| Name: Click or tap here to enter text. |
| Address: Click or tap here to enter text. |
| Post code: Click or tap here to enter text. |
| Telephone: Click or tap here to enter text. |
| E-mail: Click or tap here to enter text. |
| What relationship are they to you: Click or tap here to enter text. |

**Chosen volunteer Area(s)/:**

Tell us which area/s you are generally interested in volunteering for. You can mention more than one.

**Events (E.G. Picnic in the Park, Festive Friends, Fundraisers)**

**Projects (E.G. Foodshare, Raking & Baking, Stay & Play)**

**General help in Center (E.G. Gardening, Front Desk, DIY)**

**Other.**

**Please tell us if it is for a specific project, activity or event:**

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| Click or tap here to enter text. |

**Why you want to volunteer?**

Please use this space to tell us about why you want to volunteer for St Werburghs Community Centre.

You can tell us about:

* the kind of experience you would like to get
* the kind of position you are hoping to work towards/ training you might look for

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| --- |
| Click or tap here to enter text. |
| Click or tap here to enter text. |

We cannot guarantee that we can offer all the experience and training you want, but

we might be able to point you in the right direction to get this.

**About your skills and experience:**

Please use this space to tell us about your skills and previous experience (paid or unpaid) that you would like to use while working at the SWCC:

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| Click or tap here to enter text. |
| Click or tap here to enter text. |

**Your availability**

Which day/s of the week are you available? And at what times? If this is for a specific event, please state what times you are free and for which event.

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| --- |
| Click or tap here to enter text. |
| Click or tap here to enter text. |

If relevant, which evenings are you free?

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| --- |
| Click or tap here to enter text. |

Is there anything we should be aware of that might affect your ability to volunteer with us? (We will try to make reasonable adjustments to assist with this)

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| --- |
| Click or tap here to enter text. |

**References**

Please provide details of two people who we can contact and will provide written references to support your application to become a volunteer with the St Werburghs Community Centre.

If you do not have employment references, we can accept references from friends and others who know you, but not from your immediate family or household.

|  |
| --- |
| **1.** Name: Click or tap here to enter text. |
| Address: Click or tap here to enter text. |
| Telephone: Click or tap here to enter text. |
| Email: Click or tap here to enter text. |
| How do you know this person?: Click or tap here to enter text. |

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| --- |
| **2.** Name: Click or tap here to enter text. |
| Address: Click or tap here to enter text. |
| Telephone:Click or tap here to enter text. |
| Email: Click or tap here to enter text. |
| How do you know this person?: Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Do you have any convictions or conditional cautions which are currently unspent under the Rehabilitation of Offenders Act 1974**? Yes  / No  (declaration subject to the Rehabilitation of Offenders Act 1974)  Please give brief details:   |  | | --- | | \_\_\_ Click or tap here to enter text. \_\_\_\_ | |

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| --- | --- | --- |
| I can confirm that to the best of my knowledge the above information is correct. I accept that providing deliberately false information could result in not being able to volunteer with us.     |  | | --- | | Signature: Click or tap here to enter text. \_\_\_\_\_ |  |  | | --- | | Date:Click or tap here to enter text. | |

**Please hope to keep your details on file and contact you in future about any future volunteering opportunities.**

**If you DO NOT want to be contacted please tick here**

**Please return this form to the address on the front as soon as possible, and we will contact you about your application.**

**Thank you for applying to volunteer at St Werburghs Community Centre.**