



Support from the heart of the community

Volunteer Application Form

Strictly Confidential

(please complete in capital letters)

Personal details

Title:

Female Male

Surname.....

Forename(s).....

Address.....

.....

Postcode

Email

Please confirm you are happy for us to contact you by email Yes

Date of Birth/...../.....

Driving licence holder Yes No

Telephone (including area code)

Willing to drive Yes No

Daytime

Use of own car Yes No

Mobile

First language spoken

Evening

.....

Please confirm you are happy for us to contact you by phone Yes

Other language(s) spoken

.....

Specific areas of interest, e.g. Older people, driving etc.

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Employment Status

- | | | | |
|-----------------------------------|--------------------------|--------------------------------|--------------------------|
| Not currently seeking employment | <input type="checkbox"/> | Retired from employment | <input type="checkbox"/> |
| Unemployed but seeking employment | <input type="checkbox"/> | Retired but seeking employment | <input type="checkbox"/> |
| In full-time education | <input type="checkbox"/> | In full-time employment | <input type="checkbox"/> |
| In part-time education | <input type="checkbox"/> | In full-time employment | <input type="checkbox"/> |

Employment Experience (Please give details)

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How are you interested in helping the Wimbledon Guild?

(Not all tasks are available in all areas)

- | | | | | | |
|---------------------------|--------------------------|---------------------------|--------------------------|----------------------------|--------------------------|
| Administration / Clerical | <input type="checkbox"/> | Social Welfare Dep't | <input type="checkbox"/> | Social & Activity Centre | <input type="checkbox"/> |
| Counselling Service | <input type="checkbox"/> | Computer Room | <input type="checkbox"/> | Stroke Club / Social Clubs | <input type="checkbox"/> |
| Befriending Scheme | <input type="checkbox"/> | Fundraising | <input type="checkbox"/> | Committee Work | <input type="checkbox"/> |
| Transport service | <input type="checkbox"/> | Charity Shop
(Mitcham) | <input type="checkbox"/> | Kitchen/Cafe | <input type="checkbox"/> |

Other (please specify)

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N.B. Where appropriate, full training will be given.

Please give us an idea of the times you may be available to volunteer:

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please give details of any other organisations for whom you have volunteered:

Voluntary Organisation	Date	Position and responsibilities
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How did you hear about volunteering opportunities with Wimbledon Guild?

(Please tick all relevant boxes)

- | | | | | | |
|------------------------------|--------------------------|------------------|--------------------------|-----------------------|--------------------------|
| Wimbledon Guild Staff | <input type="checkbox"/> | Volunteer Bureau | <input type="checkbox"/> | Postcard / Advert | <input type="checkbox"/> |
| Wimbledon Guild Volunteer | <input type="checkbox"/> | Friend | <input type="checkbox"/> | Website | <input type="checkbox"/> |
| Knowledge of Wimbledon Guild | <input type="checkbox"/> | Media | <input type="checkbox"/> | Other (please specify | <input type="checkbox"/> |

Health

In terms of Health and Safety, it is important that Wimbledon Guild does not place you in the wrong role. A disability or health problem will not exclude you from volunteering with Wimbledon Guild and applications from people with disabilities are welcomed. In order to ascertain your suitability to work on a Wimbledon Guild project, Wimbledon Guild requires information about your health.

Do you consider yourself covered under the terms of the Equality Act 2010?

Yes No

If yes, what is the nature of your disability? Please give details. If preferred, continue on a separate sheet and attach it to the application form.

Do you have any allergies or other health matters that Wimbledon Guild should be aware of?

Are there any reasonable adjustments Wimbledon Guild could make to better enable you to volunteer at your chosen project? Please give details.

It is important that you inform Wimbledon Guild if you should suffer from any illness in the future that may affect your ability to volunteer for the organisation or that would put others at risk.

Emergency contact details

NameRelationship

Address

.....

Postcode

Telephone numbers (including area code)

Daytime Evening

Mobile

We only keep these details in an emergency.

Signature of volunteer

I confirm that the personal information supplied is accurate. I am willing to abide by the rules and uphold the ethos of the Charity. I understand that my tasks with Wimbledon Guild may involve issues and situations of a sensitive nature and I agree to maintain confidentiality at all times. I agree that my basic records may be kept on computer/database under the provisions of the Data Protection Act 1998 and I agree also that I may be contacted in writing or by telephone.

Signature Date

All information will be held by Wimbledon Guild in a confidential manner.

Please send this form to:

The Volunteer Coordinator
The Wimbledon Guild of Social Welfare
Guild House, 30-32 Worple Road, Wimbledon SW19 4EF
T 020 8946 0735 **E** volunteering@wimbledonguild.co.uk **W** wimbledonguild.co.uk

Registered Charity Number 200424

Volunteer Application Form May 2016

References

I wish to become a volunteer of Wimbledon Guild and agree to two references being taken up.

Please provide two references. (The referees should not be directly related to you and preferably have known you for at least two years.)

Referee information will not be stored once the reference has been taken up.

1. Name

Address

.....

Postcode Email

Telephone numbers (including area code)

Daytime Evening

2. Name

Address

.....

Postcode Email

Telephone numbers (including area code)

Daytime Evening