Volunteer Application Form

This form should be used by anyone wishing to apply for volunteering opportunities only.

Personal Details

Full Name			
Address (including postcode)			
Telephone (including STD code)		**Emergency Contact name**	
Mobile Phone		**Contact telephone** (including STD code)	
Email		**Contact mobile**	

Application information

Type of volunteering role of interest/position applied for (if specified)								
Your availability (Please tick as appropriate)	**Mon**	**Tues**	**Wed**	**Thurs**	**Fri**	**Sat**	**Sun**	**Varies**
am	☐	☐	☐	☐	☐	☐	☐	☐
pm	☐	☐	☐	☐	☐	☐	☐	

Please describe, below, how your experience, skills and knowledge will make you suitable for a volunteering role.

Please continue on a separate sheet if you wish.

What do you hope to gain from volunteering?

How did you hear about volunteering with the Academy?

Declaration of Interest in private enterprise/code of conduct

Volunteers must not allow personal and/or private interests to influence their conduct as volunteers. The Academy requires all volunteer applicants to inform the Head Teacher if they have any current employment and also if they, their partners or close relatives have an interest in a private enterprise. If the academy considers that there is conflict of interest (as a result of the information disclosed) you will not be considered for a volunteer role. Non-disclosure of a possible conflict of interest could also result in any volunteer agreement being terminated. Please detail any such information in the space provided below.

Please continue on a separate sheet if you wish

Signed		Date	

Criminal Convictions

I understand that a volunteer role which involves working with children will require me to give details of any criminal convictions I may have. I confirm that I will provide the information requested on the questionnaire given to me at the point of interview and understand that I may be required to apply for a Disclosure and Barring Service check at the appropriate level.

Signed		Date	

References

If applicable, please provide one referee from either your last/current employer and/or the last place you worked with children.
If not, give the names of people who know you well. Ideally these should be professional referees. No referee should be a relative/partner/spouse/friend.
Please ensure your referees are aware that they will be contacted – you will be unable to begin volunteering, until two references are sought.

Referee 1		Referee 2	
Name		**Name**	
Address		**Address**	
Tel		**Tel**	
Email		**Email**	
In what capacity do you know referee one?		**In what capacity do you know referee two?**	

Other Details

	Yes	No
Do you need a work permit to work in the UK?	☐	☐
Are you related to any Governor?	☐	☐
Are you related to an employee of the Academy?	☐	☐

If you have answered '**Yes**' to any of the above questions, please give full details below.

Declaration

I declare that the information I have provided is a complete and true statement. I understand that any offer of volunteer work is conditional on this declaration and if my application is incomplete, untrue, or inaccurate, then the academy shall be entitled to withdraw any offer of volunteer work.
I understand that in accordance with the Data Protection Act (1988), I agree that the academy may hold and use personal information about me for volunteering reasons and keep in touch with me. This information, including that contained in this form can be stored on both manual or computer files. It will be held securely and only accessed by authorised personnel.

Signed		**Date**	

Equal Opportunities Monitoring

The information in this sector is used only for the purposes of ensuring the effectiveness of our Equal Opportunity Policy, which is available upon request.

Gender	M	F	Age Group	<20	21- 30	31- 50	51- 60	61- 70	71+
	☐	☐		☐	☐	☐	☐	☐	☐

How would you describe yourself?

These categories of ethnic origin are recommended by the Commission for Racial Equality as the most appropriate for monitoring the UK. We recognise that the specific categories may not be appropriate for everyone. If this is the case, please use the last box.

Asian or Asian British		
Indian ☐	**Pakistani** ☐	**Bangladeshi** ☐
Any other Asian background *(Please specify)*:		
Black or Black British		
Black Caribbean ☐	**Black African** ☐	
Any other Black Background *(Please specify)*:		
White		
White British ☐	**White Irish** ☐	
Any other White Background *(Please specify)*:		
Chinese or other Ethnic Group		
Chinese ☐		
Any other Ethnic Background *(Please specify)*:		
Mixed		
Mixed ☐		

Do you consider yourself to have a disability/impairment?	
Yes ☐	**No** ☐
If yes, please specify:	
If yes, do you have any particular needs in relation to your disability/impairment?	
Yes ☐	**No** ☐
Please discuss these with the Head Teacher	
Do you have any medical condition(s) which may affect your volunteering role?	
Yes ☐	**No** ☐

I understand that if I have answered 'yes' to the above question I may be required to undergo medical clearance.

Signed		**Date**	