

Volunteer Application Form

Thank you very much for your interest in volunteering for Vision 21. If you need assistance with completing this form, please email us at volunteering@v21.org.uk.

All the information you provide on this form is confidential and will not be passed on to a third party.

**Please tell us about yourself**

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** |  | **Forename(s)** |  |
| **Surname** |  | | |
| **Address** |  | | |
| **Post code** |  | | |
| **Telephone** |  | | |
| **E-mail** |  | | |
| **Emergency contact:**  (Name, relationship to you & contact number) |  | | |

**Please tell us a little more about you and what skills and qualities you feel make you suitable for volunteering at Vision 21**

**Where you would like to volunteer**

**Please select what Vision 21 projects or areas of work you are interested in?**

(Tick as many boxes below as you would like)

🞏 Catering 🞏 Horticulture 🞏 Life Skills

🞏 Woodwork 🞏 Retail 🞏 Office Skills

🞏 Pottery 🞏 ICT 🞏 Cards and Creative Choices

🞏 Craft Stalls 🞏 Fundraising Events 🞏 Administration/Finance

🞏 Other – please specify

**Your availability to volunteer**

## Which days/ times are you available to volunteer? *Please tick and state times if needed to all that apply.*

Please be aware Saturday and Sunday are only possible in some projects or events. We can be flexible for volunteering times for projects but trainees attend from 9am-3pm.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Sat** | **Sun** |
|  | 🞏 | 🞏 | 🞏 | 🞏 | 🞏 | 🞏 | 🞏 |
| **Time** |  |  |  |  |  |  |  |

**References**

Please provide us with the details of two people whom we may contact as referees, to comment on your suitability for volunteering. These can be friends or colleagues but not family members, and must have known you for 12 months or more.

|  |  |  |
| --- | --- | --- |
|  | Referee 1 | Referee 2 |
| Name |  |  |
| Job Title /Position |  |  |
| Address |  |  |
| Email |  |  |
| Telephone |  |  |
| What is your relationship to this person? |  |  |

**Disclosure and Barring Service**

**Due to the vulnerable nature of our students Vision 21 will require two character references and completion of an enhanced Disclosure and Barring Service check for all new staff and volunteers.**

(If you would like further information on this you can request a copy of Vision 21’s *Recruitment of People with a Criminal Record* Policy)

Do you have any objection to this? YES🞏 / NO 🞏

The enhanced Disclosure and Barring Service will be completed during the informal interview process. The enhanced check will highlight prescribed details of every conviction (including a spent conviction), caution, warning and reprimand which is recorded in central records, in addition to:

* Any information which, in the opinion of a chief officer, might be relevant for the purpose and ought to be included in the certificate.
* Details of whether the applicant is banned from working with children or vulnerable adult.

Please answer the following questions

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Have you any criminal convictions?** (including spent convictions)  **YES** 🞏 **NO** 🞏 | | | | | | |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| **Do you have any prosecutions pending, cautions, warnings or reprimands?**  **YES** 🞏 **NO** 🞏 | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| **Are there circumstances that might exclude you from working children or vulnerable adults?**  **YES** 🞏 **NO** 🞏 | | | | | | | | |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

If you have answered yes to any of the above, please give particulars and dates below:

**Marketing Preferences**

**Keeping you informed about Vision 21**

**Your support means a lot to Vision 21. We want you to see the difference your support makes, and we’d love to stay in contact by e-mail to keep you up to date with news and events from the projects.**

Please tick the box below if you are happy to hear from us in this way:

🞏 Yes, please keep me updated by e-mail

**Vision 21 regularly photographs and films of trainees, staff and volunteers for use in internal and external promotional material including social media, website and printed publications.**

Please tick the box below if you are happy to have your photograph taken or to be filmed.

🞏 Yes, I am happy for my image to be used in any such material.

|  |  |
| --- | --- |
| **Where did you hear about Vision 21’s volunteering opportunities?** |  |

**Declaration**

**I certify that the information contained in this application form is correct.**

In accordance with the Data Protection Act 1998, I agree that Vision 21 Cyfle Cymru may hold and use personal information about me for volunteering reasons and to keep in touch with me. This information, including that contained in this application can be stored on both manual and computer files. **In the event that my application is not successful, I give Vision 21 Cyfle Cymru consent to hold my details for the full 12 (twelve) months in order to be considered for other volunteer opportunities.**

**Signature: Date:**

Please return this form to:

**Chris Bowsher** - Volunteer & Placements Officer

[volunteering@v21.org.uk](mailto:volunteering@v21.org.uk)

Vision 21 Cyfle Cymru

Units 10 - 12 Fieldwa,

Heath, Cardiff

CF14 4HY

*We aim to provide written acknowledgement of your application within 10 working days of receipt.*