

Volunteering Application Form

Confidential



Registered Charity No: 285139
Accredited Museum

PLEASE COMPLETE THIS FORM AND RETURN TO:

Volunteering, Prickwillow Museum, c/o Pauline Dunham, 19 Townsend, Soham, Cambs. CB7 5DD

email: Pauline@pauldunham.co.uk

Personal Details		
First Name	Surname	Title
Address		
Postcode		
Contact Telephone No.	Mobile	
Email		
Date of Birth		

Role Applied for

We are keen to take on volunteers from all backgrounds, including people in work, those who are not currently in training, education or paid work, or people who have been unemployed for a long time. Please answer the following questions below:		
Are you currently in education?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently carrying out any kind of training?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Current Occupation if employed		
Are you retired?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently unemployed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If the answer is yes, have you been unemployed for over six months?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Availability

(Please supply as much information as you can to help us match your availability to our needs)

How much time would you like to volunteer each week?

Do you have a length of time in mind that you were interested in volunteering for (in weeks or months)

When would you be available to start Volunteering

Please tick the days below to show when you would be available to volunteer. If you are able to be flexible about this please tick any.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
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"/>
Any time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you in the past, or are you currently doing other Volunteer work?

Yes

No

If yes, where did you work and what type of work did you do?

Do you read or speak any other languages than English?

Yes

No

Please give details if appropriate

Please tell us why you would like to Volunteer at the Prickwillow Museum and what particular skills and experience do you think you can bring to your volunteering role at the museum. You may attach a CV if it is appropriate to the role.

Criminal Convictions

Candidates are required to disclose details of all criminal convictions, cautions or bind-over orders that are not spent. The Rehabilitation of Offenders Act 1974 provides that certain convictions shall be regarded as "spent" after specified periods of time have elapsed. You do not need to disclose convictions that are "spent" at the date you sign the application form.

Have you ever been convicted in a court of law of any criminal offense?

Yes

No

If Yes, please give further details of court, date of conviction, and sentence imposed.

Referees

Please give contact details of two people who we may contact to comment on your suitability to volunteer with us. These people should have known you for least two years, but must not be related to you in any way

First Referee		Second Referee	
Name		Name	
Address		Address	
Postcode		Postcode	
How long have you known this person and in what capacity?		How long have you known this person and in what capacity?	
Email		Email	
Tel.		Tel.	

Declaration

I declare that the information given in this application form is true and complete. I understand that if I have given any misleading information on this form or made any omissions, will be sufficient grounds for terminating my volunteering.

Signature		Date	
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Emergency Contact Details

If we are able to offer you a voluntary role we shall need some more details about whom we may contact in the case of emergency. Please supply the information requested below either now or before volunteering:

Name

Address

Postcode

Daytime Telephone Number

Mobile

What is their relationship to you

Equal Opportunities Monitoring Form

This section of the application is used solely for monitoring purposes. The completion of this monitoring form is completely voluntary, but it is appreciated when volunteers take the time and trouble to do so, because the information it contains helps Cambridge County Council to monitor and improve the diversity of volunteers in the area. Statistical information will be used anonymously. Please ignore any questions you would prefer not to answer

Full name	
Date of Birth	Gender
I belong to the following ethnic grouping (check as appropriate)	
White	Black or Black British
<input type="checkbox"/> British	<input type="checkbox"/> Caribbean
<input type="checkbox"/> Irish	<input type="checkbox"/> African
<input type="checkbox"/> Other (please specify)	<input type="checkbox"/> Other (please specify)
	<input type="checkbox"/>
Asian or Asian British	Of Mixed Race
Indian	White & Black Caribbean
Pakistani	White & Black African
Bangladeshi	White & Asian
Other (please specify)	Other (please specify)
Chinese	Any other ethnic group
<input type="checkbox"/> Chinese	<input type="checkbox"/>
<input type="checkbox"/> Rather not say	

The Equality Act 2010 defines a disability as a physical or mental impairment which has a substantial and long term (i.e. more than 12 months) adverse effect on a person's ability to do normal daily activities. You may still be considered to have a disability if you are not currently adversely affected but the impairment is likely to recur.

Do you consider yourself to have a disability?

Yes

No

Equal Opportunities Monitoring Form cont.

Do you have any disabilities for which special arrangements should be made? If so, please specify the nature of the disability below

I understand that this information may be stored and processed as part of the Prickwillow Engine Trust and Cambridgeshire County Council monitoring of equal opportunities and I give my consent for my details to be used for this purpose.

Signature		Date	
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