**Volunteer Application Form**

Thank you for taking the time to complete this application form and for volunteering your time to support us here at One-to-One Enfield with our activities and projects, making lives better for autistic adults as well as people with learning disabilities in Enfield. We are truly grateful.

**Personal Information:**

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Telephone (Mobile) |  |
| E-mail |  |
| Date of Birth |  |

**Emergency Contact:**

|  |  |
| --- | --- |
| Name |  |
| Telephone (Mobile) |  |
| E-mail |  |
| Relationship to you |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Availability:***please x as appropriate* | Mon | Tues | Wed | Thu | Fri | Sat | Sun |
| Morning |  |  |  |  |  |  |  |
| Afternoon |  |  |  |  |  |  |  |
| Evening |  |  |  |  |  |  |  |

**Please state below if there is a specific volunteering role that you want to apply for:**

……………………………………………………………………………………………………………………………………………….

|  |  |
| --- | --- |
| **Do you currently hold a valid, up-to-date DBS check? If yes, please provide us with a copy. If no, we can arrange for you to have one.** | |
| Yes | No |

**Please tell us about any relevant work or volunteering experience you already have:**

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**Do you have any specialist skills, interests or hobbies that you would like to use when volunteering for us?**

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**Are there any particular skills you want to develop whilst volunteering with One-to-One Enfield?**  
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………………………………………………………………………………………………………………………………………………

**At One-to-One Enfield we are committed to equal opportunities. So that we can consider any reasonable adjustments to the volunteer environment, and allow us to better support you in your role, please give details below of any disabilities, health issues or support needs:**

……………………………………………………………………………………………………………………………………………….

……………………………………………………………………………………………………………………………………………….

**Under the rehabilitation of Offenders Act 1974, do you have any unspent criminal convictions?** *Circle as appropriate:*

|  |  |
| --- | --- |
| Yes | No |
| **If you have circled yes, please write details below or on a separate sheet if you require more room and attach to this form.** Having a conviction will not necessarily stop you from volunteering but, it will need to be taken into consideration when assessing your suitability. | |

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**References:**

Reference checks are a standard part of our volunteer selection process. Please provide the name and contact details are two people who are **not** family members and who are willing to act as referees for your chosen voluntary work position. Ideally one reference should come from an employer, former employer or volunteer organiser.

|  |  |
| --- | --- |
| **Referee 1** | |
| Name |  |
| Address |  |
| Telephone (Mobile) |  |
| E-mail |  |
| Relationship to you |  |

|  |  |
| --- | --- |
| **Referee 2** | |
| Name |  |
| Address |  |
| Telephone (Mobile) |  |
| E-mail |  |
| Relationship to you |  |

I declare that the information contained in this application is true and correct. I certify that to the best of my knowledge, the information given on this form is correct. I have omitted nothing that, to the best of my knowledge, might affect this application; and I acknowledge that misleading statements may be sufficient for cancelling any agreements made.

|  |  |
| --- | --- |
| Signature: | Date: |