mencap Nuneaton Bedworth and District

VOLUNTER APPLICATION FORM



Nuneaton Bedworth and District Volunteer Application Form

Personal Details					
Name					
Address					
			D		
Phone	Postcode: Home:				
	Mobile:				
	Work (if applicable	e)			
Email					
Which volunteer	roles are you intere	ested in?			
Activity facilitator			Website / social media		
Administration			Press & Publicity		
Fundraising			Not sure yet		
Please tell us about any work, volunteering, personal experience or skills that you have that are relevant to the role you are interested in					



Volunteer Application Form

Availability

At what times are you interested in volunteering – please tick as many as you like

IV	⁄lon	Tue	Wed	Thurs	Fri	Sat	Sun
Morning							
Afternoon							
Evening							

Do you have any particular needs that we should be aware of so as to best support your

volunteering with us?					
References					
	oplication, we need you to supply us with two people who know you well				
	on your suitability for this role. They should not be family members. If you who to put we are happy to discuss this with you				
are not sure about w	vilo to put we are nappy to discuss this with you				
Referee 1					
Name:					
Address:					
	Postcode:				
Phone:					
Email:					
How does this					
person know you?					
Referee 2					
Name:					
Nume.					
Address:					
	Postcode:				



Phone:

Volunteer Application Form

Email:						
How does th	nis					
person know	v you?					
If your volunteering role falls within the Rehabilitation of Offenders Act 1974 or is a specified or regulated activity, we will require you to a DBS check.						
We welcome volunteer applications from every one. Having a criminal record will not necessarily						
exclude you from volunteering with us and your application will be dependent on the nature of						
the offence and position applied for.						
Cienad						
Signed						
Date						
How did you hear about us? (please tick where you heard about us)						
Volunteer centre		eer centre	Word of mouth			
-	Other organisation		Other (please state)			
	Friend or family					
				<u> </u>		

Thank you for taking the time to complete this form. Please return this form to:

The Volunteer Coordinator
Nuneaton Bedworth and District Mencap Society
Chetwynd House
The Parade, Off Prince's Street
Nuneaton
Warwickshire
CV11 5NR

Or by email to: mencap.nuneatonbedworthdistrict@gmail.com