

CONFIDENTIAL Children's Services Volunteer Application Form

Thank you for your interest in volunteering for Barnardo's. The information you provide in this application form will help us to decide how you might be able to help us. It is really helpful if you can give us as much information as possible about your experiences, interests and availability to volunteer. If you have any questions about this form, please do not hesitate to contact us on the details at the end of this form.

Part 1 – The volunteer rol	e you are app	lying for
Role title:		
Name of Project/Service/Te	eam:	
Location:		
Part 2 - Personal informat	tion	
First name(s):	Surname:	Title: Mr/Mrs/Ms/Miss
Home Address:		Daytime phone number:
		Evening phone number:
		(if different)
		Mobile phone number:
Postcode:		email address:
Date of Birth:		National Insurance No:
Part 3 - How did you hear	r about volunt	teering?
☐ Word of mouth☐ School, college, university☐ Event☐ Internet	 Media (radio, TV, newspaper) Leaflet or poster Volunteer Centre Event, talk or presentation about Barnardo's 	
Other - please give details		
Part 4 - Your interests and		
What do you hope to gain from the property of		g with Barnardo's? sts you have that might be relevant to the
Part 5 – Your availability		
What days and times wou volunteer?	id best suit y	ou and how often would you be able to

Part 6 – Your skills and experience			
Please tell us about any paid/voluntary velevant to this role.	work experience you have which may be		
Please tell us about any skills, qualification may be relevant to this role.	ns or training courses that you have which		
Please tell us about any qualifications or tr	aining you are currently studying for.		
the following skills? Tick any of the boxes wh ☐ Sign language ☐ Makaton ☐ Driving licence (car) ☐ First aid	MiDAS mini-bus driving certificate Basic food hygiene other than English)		
Part 7 - References			
Please provide details of two people who have known for references regarding your work/studies/expensions and we will contact you to a teacher/tutor/social worker. If you areas, please note this and we will contact you to	rience and your suitability to volunteer with current/past employers, places you have you are unable to provide referees from these		
(1) Title: Mr/Mrs/Ms/Miss	(2) Title: Mr/Mrs/Ms/Miss		
Name:	Name:		
Address:	Address:		
Postcode:	Postcode:		
Tel No:	Tel No:		
Email address:	Email address:		
Occupation:	Occupation:		
How do you know this person?	How do you know this person?		
When did you last have contact with this person? When did you last have contact with the person?			

Part 8 - Support and health needs						
Do you have any disabilities, hea		support needs that	we should be			
aware of when organising your v	volunteering?					
If <u>yes</u> , please give details to help us	to plan your voluntee	ering:				
Part 9 - Emergency contact de	etails					
Please give details of someone v	ve may contact in a	n emergency if need	ded:			
Full name:	-					
Address:						
Tel No.(s) Day:	Evening:	Mobile:				
How are you related to this pers	on?					
Part 10 - Declaration of Crimin	nal Records and D	isqualifications				
			d familiae with			
As a children's charity, we have a duty to protect the children, young people and families with whom we work. The volunteer role you have applied for will impact on what information you are required to disclose under the Rehabilitation of Offenders Act 1974 and/or the Childcare Act 2006. For the volunteer role you have applied for, please declare any criminal convictions as follows:						
☐ Volunteer roles that do not involved complete part 10A	_		·			
\square Volunteer roles working with child	dren and vulnerable a	dults - please complet	te part 10B			
Part 10A –Volunteer roles that d	o not involve conta	ct with children or				
vulnerable/protected adults		• 0/				
Have you ever been convicted of convictions deemed as 'spent' under		•	disclose			
		□Yes	□No			
If YES, please give details of all offer a sealed envelope, marked confiden	•	•				
Part 10B - Volunteer roles work	ing with children o	vulnerable/protect	ted adults			
Have you ever been convicted of given a final warning by the policy Wales, please read the 'criminal recoinformation to disclose before answers	ce ('spent' or 'unsp ord information' guida	ent')? (For roles in El	ngland and			
Are you disqualified from working	ng with children or	vulnerable/protecte	ed adults?			
Are you aware of any police enquiring on your suit	_		nst you, which			
If 'YES', please give details of all offe separate sheet of paper, in a sealed Volunteer Co-ordinator.		· · · · · · · · · · · · · · · · · · ·				
I understand that the relevant c	hecks for the role I	am applying for wil	l be sought. □No			
England and Wales only - Are yo	ou registered with t	he DBS Update serv	ice?			
		Yes	☐ No			

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consent. We would like to keep you opportunities that may be of interestinformation please let us know by Barnardo's you will continue to recommend to the continue to recommend to the continue to the contin	ort and promise to respect your privacy. The data we gather with the Data Protection Act (1998). We will not disclose, plied by you with any third party organisation without your ou informed about the vital work we do and of volunteering est to you, however if you do not wish to receive this ticking this box. (NB If you are already a supporter of eive appropriate information from us).
Part 12 - For Parents/Guard	ians of volunteers under 16 only
I give permission for the above hold their details on file.	person to volunteer with Barnardo's and for Barnardo's to
	l ask the above person to agree to adhere to all relevant forms during training appropriate to their role.
Signed:	Print name:
Date:	Relationship to prospective volunteer:
Part 13 - Declaration	
recruitment purposes and will be h holding this form in paper format i	
I confirm that the information I ha statements or omissions may resu	ve given is correct and complete and that any false It in my services to be terminated.
Signed:	Date:
If you answered <u>yes</u> , please ensure Many thanks for taking the tim form to (name and address): Louise Rawe, Dundee Volunteer Barnardo's Family Support Tear Please contact the following per become a volunteer (name/tele	e to complete this form. Please return your completed Co-ordinaror n, 14 Dudhope Street, Dundee, DD1 1JU erson for any queries regarding your application to
Are you aged under 16? If you answered yes, please ensure Many thanks for taking the tim form to (name and address): Louise Rawe, Dundee Volunteer Barnardo's Family Support Tear Please contact the following per become a volunteer (name/tele	e that part 12 is completed e to complete this form. Please return your completed Co-ordinaror n, 14 Dudhope Street, Dundee, DD1 1JU erson for any queries regarding your application to ephone no/e-mail address):

CONFIDENTIAL: Equal opportunities monitoring

You do not have to complete this part of the form but if you would like to do so, the information would be very helpful to us. The information will only be used to provide us with statistics to show us where we need to target our volunteer recruitment. This will help us to make sure that Barnardo's welcomes volunteers from all areas of society, and will mean that we are better able to help some of the most vulnerable children and young people in the UK.

Please tick the boxes that apply to you.
How would you describe your religion or belief? Christian (including Church of England, Catholic, Protestant and all other Christian denominations) Buddhist Hindu Jewish Muslim Sikh Any other religion None Prefer not to say
Do you have a disability? Yes No
How would you describe your cultural or ethnic origin? A. White British Welsh English Irish Scottish Northern Irish Gypsy/Traveller Any other white background B. Mixed White & Black Caribbean White & Asian White & Black African Any other mixed background C. Asian Indian Pakistani Bangladeshi Chinese Any other Asian background D. Black or Black British Caribbean African Any other black background E. Other ethnic group Arab Any other ethnic background
For volunteers 16 years and over only: How would you describe your sexual orientation? Bisexual Gay man Other For volunteering positions in Northern Ireland only: Please indicate the community to which you belong I am a member of the Protestant community I am a member of the Roman Catholic community I am a member of neither the Protestant nor the Roman Catholic community
For volunteering positions in Wales only: Are you Welsh speaking? Yes No

Thank you for providing this information