

# Application Form - International

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| Please complete this form in **BLOCK CAPITALS** to apply to be a full-time Volunteering Matters volunteer |
| First Name(s) |
| Family Name(s): |
| ***Please write your full name as it appears on your passport*** |
| Female/Male: |
| Date of Birth: |
| Full Postal Address: |
|  |
|  |
| Post/Zip Code: |
| Telephone: |
| Mobile/Cell-phone: |
| Email (please write clearly): |
| Nationality: |
| Do you have a full driving Licence? **YES/NO** |
| Are you willing and able to drive in the UK? **YES/NO** |

**Criteria for Volunteering** – (Please confirm you fulfil the application criteria by ticking the boxes below) I am over 18yrs of age I am willing to be placed where my help is needed most

I can volunteer full-time for 6-12 months

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| **Volunteering Details** |  |
| I can be a volunteer for Months | (you can choose any time between 6 and 12 months) |
| Month you wish to start | Year |
| My start date is flexible **YES/NO** |  |
| How did you first hear about Volunteering Matters? e.g. from a friend, national newspaper etc. Please be specific | |
| Reason for Volunteering eg. gap year, need experience for a career, want to help people etc. | |

We add your details to Volunteering Matters’ database to process your application. We would also like to tell you about Volunteering Matters’ volunteering activities and services.

Please tick this box □ if you do not want to receive further details. Volunteering Matters does not sell your personal information to other organisations.

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## Referees

### Before Volunteering Matters can place you in a volunteering opportunity we must receive two references.

Please write below the names and addresses of two people who know you well and who can provide references for you. Let them know that you have named them as referees.

Referees can be your current or former school/college/university teacher, current or former employer, religious leader, benefits officer.

**DO NOT use relatives or friends as referees**

## 1

|  |  |
| --- | --- |
| Full Name | |
| Full Postal Address | |
|  | |
| Post/Zip Code | Telephone (landline): |
| How do you know him/her? | |

**2**

|  |  |
| --- | --- |
| Full Name | |
| Full Postal Address | |
|  | |
| Post/Zip Code | Telephone (landline): |
| How do you know him/her? | |

**Emergency Contact Person**

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| --- |
| ***Please provide details of someone that we should contact for you in the event of an emergency, illness or accident (If there is a person in the UK who has agreed to help you in this way, please give their details):*** |
| Name |
| Address |
|  |
| Email |
| Telephone |
| How do you know him/her? |

If you have to leave your project for any reason you will be responsible for your own accommodation, food and all other expenses. Volunteering Matters have no extra funds to help you.

I agree to take full responsibility for my own care if I am ill or if I have an accident and I choose to leave the project. I understand that Volunteering Matters cannot help me financially whilst I am awaiting a placement or if I am unable to continue my placement for any reason.

### Signature Date

*Volunteering Matters looks forward to welcoming you as a full-time volunteer*

Volunteering Matters is a company limited by guarantee registered in England under No 1435877 and is a registered charity No 291222