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## Volunteer Application Form

Thank you for your interest in volunteering with Turning Heads.

Volunteers play a vital role in the support we can give our trainees. All volunteer applications are reviewed with consideration of current volunteer opportunities. The information you provide will be stored in confidence under the provisions of the Data Protection Act. Your completed form will be held securely and confidentially. Only authorised staff will have access to your information.

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### Personal Details

Name: \_\_\_\_\_ Mr.  Mrs.  Miss.  Ms.

Address: \_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Mobile)  
\_\_\_\_\_

E-Mail: \_\_\_\_\_

Date of birth \_\_\_\_\_

If you are involved with us as a volunteer and an emergency arises, whom should we contact?

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
\_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Mobile)  
\_\_\_\_\_

### Equal Opportunities

Turning Heads is committed to equal opportunities and all volunteer recruitment decisions will be based on merit, suitability for the role and experience. Volunteer recruitment decisions will not be influenced by race, colour, nationality, religion, sex, marital status, family status, sexual orientation, disability or age. Turning Heads fully endorses a working environment free from discrimination and harassment.

Turning Heads is committed to standards of excellence in Safeguarding practices. As your volunteer role will involve direct contact with vulnerable adults, you may be required to complete a DBS check, at no cost to yourself. In the meantime, please complete the question below.

Have you ever been convicted of an offence in the UK or elsewhere?

Yes  No

If you ticked yes, please provide details below

## Your Skills and Interests

1. Have you ever done any voluntary work before? Yes  No

If you answered yes, please tell us a little about the experience.

2. Why do you want to volunteer now? What has motivated you to get in touch with us?

3. Do you have any particular skills or qualities that you could use in your voluntary work?

4. When are you available for voluntary work?  Totally Flexible

|  | Monday | Tuesday | Wednesday | Thursday | Friday |
|--|--------|---------|-----------|----------|--------|
|  |        |         |           |          |        |

## References

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Place of Work: \_\_\_\_\_ Position: \_\_\_\_\_  
(If applicable)

Telephone: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

E-Mail: \_\_\_\_\_

2.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Place of Work: \_\_\_\_\_ Position: \_\_\_\_\_  
(If applicable)

Telephone: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

E-Mail: \_\_\_\_\_

If you have any queries when completing this application form, please phone Alan on 07817777739 or e-mail [admin@turningheads.org.uk](mailto:admin@turningheads.org.uk)

Is there any additional information you would like to bring to our attention?

I declare that the information I have provided is true.

Signed \_\_\_\_\_ Date \_\_\_\_\_

| For office use only                   | Notes |
|---------------------------------------|-------|
| Volunteer Position _____              |       |
| Volunteer Interview _____             |       |
| Volunteer Role Description sent _____ |       |
| References Collected _____            |       |
| Volunteer Start Date _____            |       |