**FRONTLINE VOLUNTEER APPLICATION FORM**

Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: (Mr/Mrs/Miss/Ms or title) \_\_\_\_\_\_\_\_\_\_\_\_\_

Forenames: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Post code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime telephone no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age if under 18: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a current full driving licence? YES/NO

Do you have access to a car? YES/NO

Present occupation/status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you read or speak a foreign language? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Due to our organisational policies regarding voluntary checks, please answer the following questions:  
  
Have you ever been**charged with a criminal offence in the UK or any other country? YES/NO  
  
bound over by a criminal conviction in the UK or any other country? YES/NO  
  
received a police caution, final warning or reprimand? YES/NO  
  
dismissed from any employment, office or other position by reason  
of misconduct? YES/NO  
 **Are you**  
currently subject to a police investigation, whether in the UK or in any  
other country? YES/NO  
  
If you answered YES to any of the above then you will be required to discuss the matter with the HR manager before proceeding with the application.  
  
You may be required to undertake a Disclosure and Barring Service check.

Have you volunteered before? YES/NO  
  
If yes, please give brief details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
Which Aspect of this volunteer role interests you? (please tick one or more boxes)

Aspect 1  Aspect 2  Aspect 3  Aspect 4

Are you interested in attending PACE training to become an Appropriate Adult? (please tick one box only)

Yes  No  Don’t know  I need more information

Do you have particular skills, hobbies or interests you might be able to use as a volunteer?  
  
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can you commit to 6 months or more? Yes  No  Don’t know

Please indicate days and times when you will be able to help us:

**Day Morning Afternoon Evening**

10am – 1pm 12.30pm – 3.30pm until 9pm

Monday \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Tuesday \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Wednesday \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Thursday \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Friday \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Saturday \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Please give the details of two adults, not relatives, whom we may contact as your referees:

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Tel no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

(friend, employer, etc.) (friend, employer, etc.)

Please read and sign the following declarations:

**HEALTH DECLARATION**

I am not aware that my past or current mental or physical health status would make voluntary work detrimental to me or adversely affect anyone I many come into contact with. If you are unsure please discuss at interview.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CLIENT CONFIDENTIALITY DECLARATION**

I accept that all information which may come to my knowledge, directly or indirectly, in the course of my volunteering must be treated as strictly confidential and must not be imparted to any person including the person concerned.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for completing the application form.

**PLEASE RETURN TO**

**HR**

South East and Central Essex Mind Ltd

112a Southchurch Road

Southend-on-Sea

SS1 2LX

**EQUAL OPPORTUNITY AND DIVERSITY MONITORING**

South East and Central Essex Mind fully supports the principle of equal opportunities and firmly opposes all forms of unlawful or unfair discrimination or harassment on the grounds of sex, race/ethnicity, disability, age, religion/belief, sexual orientation, gender reassignment, pregnancy/maternity.

The information in this section is used to monitor the effectiveness of our Equal Opportunity and Diversity Policy and is entirely voluntary and plays no part in the selection process. This information will be treated in the utmost confidence and will only be used for statistical purposes therefore we hope that you feel comfortable completing this section.

|  |
| --- |
| **White**  English / Welsh / Scottish  Irish  Gipsy or Irish Traveller  / Northern Irish / British  White Eastern European  Any Other White Background  **Mixed / Multiple Ethnic Groups**  White & Black Caribbean  White and Black African  White & Asian  Any Other Mixed / multiple ethnic background  **Asian / Asian British**  Indian  Pakistani  Bangladeshi  Chinese  Any other Asian background  **Black / African / Caribbean / Black British**  African  Caribbean  Any other Black / African / Caribbean background  **Other Ethnic Group**  Arab  Any other ethnic group  **Refused** |

|  |
| --- |
| **Date of Birth:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Gender:** Male  Female  Transgender  Other  please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Sexual Orientation:**  Heterosexual  Lesbian  Gay  Bisexual  Other  please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |