

Reasons for Applying:*Please tick all which are appropriate*

Seeking to fill some spare time	<input type="checkbox"/>	Seeking to Use a particular skill	<input type="checkbox"/>
Seeking a Career in Watford Mencap	<input type="checkbox"/>	Seeking employment	<input type="checkbox"/>
Seeking Work Experience	<input type="checkbox"/>	Seeking a Student Placement	<input type="checkbox"/>
Other: Please give details			

Are you*Please tick all which are appropriate*

In full time employment	<input type="checkbox"/>	In part time employment	<input type="checkbox"/>
Seeking employment	<input type="checkbox"/>	Retired	<input type="checkbox"/>
In full/part time education?	<input type="checkbox"/>	If so name of School/College	
Other: Please give details			

Volunteer Role*What role are you interested in?**How did you hear about the opportunity?**When are you available to volunteer?*

Time	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning							
Afternoon							
Evening							

PERSONAL INFORMATION:*Tell us about your skills, knowledge, hobbies and interests*

Do you hold a current full driving licence? **YES/NO**

Do you have use of a car? **YES/NO**

Emergency Contact Details

	Contact 1	Contact 2
Name		
Relationship to you		
Telephone		
Alt Telephone / Email address		

REFEREES DETAILS – Please give full contact details of two referees who have known you for at least one year, and who are not related to you.

For applicants in education, one referee should be your teacher/year head or head teacher/college/university tutor and the other any person over the age of 18 years who has known you for at least two years.

If you are currently, or have recently been involved in any voluntary work/work experience etc, one of your referees should be from that organisation.

Our preferred choice of communication is via Email.

1.

<i>Title:</i> <i>Name:</i>
<i>Relationship to you (ie. how they know you):</i>
<i>Email address:</i>
<i>Address:</i>
<i>Postcode:</i>
<i>Tel No:</i>

2.

<i>Title:</i>	<i>Name:</i>
<i>Relationship to you (ie. how they know you):</i>	
<i>Email address:</i>	
<i>Address:</i>	
<i>Postcode:</i>	
<i>Tel No:</i>	

Disclosure and Barring Service (DBS) Checks

In the interests of the people we are serving, it is Watford Mencap's policy that all Volunteers over 16 years old require an Enhanced Disclosure from the DBS. You are also required to disclose any unspent criminal convictions you have in line with the Rehabilitation of Offenders Act 1974, as well as disclosure of convictions, which are regarded as spent under provisions of the Rehabilitation of Offenders Act (Exceptions) 1975.

Please note that having a criminal record will not necessarily bar you from volunteering with us.

This will depend on the circumstances and background of any offences.

Any information received from the DBS will be treated with the strictest confidence and only seen by those registered to do so.

Please read the following information carefully and answer Yes or No to the statements:

I have spent criminal convictions to declare Yes / No

I have unspent criminal convictions to declare Yes / No

Have you ever been cautioned or subject to a bind over order Yes / No

If you have ever had any criminal convictions please provide full details on a separate sheet of paper and place inside a separate sealed envelope with your application form. **Please mark this envelope for the attention of Personnel only.**

Data Protection

To run our administration effectively, we need to put your name on our Database. Your details will remain confidential and will not be passed onto any other organisation without your prior permission. Watford Mencap is registered under the 1998 Data Protection Act and will treat all information you supply in accordance with the Act.

Declaration

I confirm that the above information is correct and that I am over 16 years of age. I consent to all personal and sensitive data about me being stored and used for business purposes by Watford Mencap

I also confirm that I will disclose any criminal convictions or pending charges during my volunteering with Watford Mencap.

SIGNED:

DATE:

Thank you for taking the time to complete this form.

Please return it to the Volunteer Development Manager. The Manager will be happy to receive your application via email.

Email: swoodley@watfordmencap.org.uk

Or post to:

Sara Woodley
Volunteer Development Manager
Watford Mencap
The Old Town Hall
105 High Street
Rickmansworth
Herts WD3 1AN

Watford Mencap

Equal Opportunities Monitoring Form - VOLUNTEERS

EQUAL OPPORTUNITIES

Mencap is committed to ensuring equality of opportunity to all volunteers. All volunteers are valued and applicants will receive fair treatment regardless of sex, sexual orientation, disability, race, age, marital status, religion or religious belief, colour, ethnic or national origin and caring responsibilities. No volunteer shall be disadvantaged by selection or conditions and requirements which cannot be shown to be justified.

The information you provide is confidential and will be used to monitor our equal Opportunities Policy.

Area of Volunteering: _____

Where did you hear about us? _____

Are you:

Male Female Transgender Married Unmarried

What is your ethnic group?

Choose one section (a – e) and then tick the appropriate box to indicate your cultural background.

a) White

White and Asian

British

Irish

Gypsy or Irish Traveller

Any other white background

b) Mixed

White and Black Caribbean

White and Black African

Any other mixed background

d) Black

Caribbean

African

Any other black background

c) Asian

Indian

Pakistani

Bangladeshi

Chinese

Any other Asian background

e) Other ethnic group

Arab

Any other background

I do not wish to disclose this

Please tell us the age range you belong to:

14 – 16 16 – 18 18 – 25 25 – 40 40 – 55 55 – 70 70+

What is your religion?

Christian

Hindu

Muslim

Sikh

Jewish

Buddhist

Other, please specify:

I do not wish to disclose this

Please select the option which best describes your sexuality

Lesbian

Heterosexual:

Gay

Bisexual

I do not wish to disclose this

Disability Discrimination Act 1995 and 2005

The Disability Discrimination Act protects disabled people. The Disability Discrimination Act defines disability as a physical or mental impairment with long-term, substantial effects on the ability to carry out normal day to day activities. This includes people with long-term health conditions. If you tell us that you have a disability we can make reasonable adjustments for your interview and your workplace.

Do you consider yourself to have a disability Yes No

I do not wish to disclose this

Please state the type of impairment which applies to you. People may experience more than one type of impairment, in which case you may indicate more than one. If none of the categories apply please mark other.

Physical Impairment	<input type="checkbox"/>	Learning Disability/Difficulty	<input type="checkbox"/>
Sensory Impairment	<input type="checkbox"/>	Long standing illness	<input type="checkbox"/>
Mental Health Problem	<input type="checkbox"/>	Other	<input type="checkbox"/>