,

VOLUNTEER APPLICATION FORM

PLEASE COMPLETE USING BLACK INK or TYPESCRIPT

|  |  |
| --- | --- |
| Volunteer Role Applied for |  |
| Application Ref. | (Office Use Only)  |

PERSONAL DETAILS

|  |  |
| --- | --- |
| Surname |  |
| First Name and Title | ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mr □ Mrs □ Miss □ Ms □ Dr □ Other □ |
| Home addressPost code |  |
| Home Telephone No. |  |
| Mobile Telephone No. |  |
| E-mail Address | Please provide your email address so that we can acknowledge your application  |
| Date of Birth  | Date | Month  | Year |

Application Ref. No.

(Office Use Only)

Please use the spaces bellow to give us some background on your interests and experience

|  |
| --- |
| Why would you like to be a volunteer with West Central London Mind? |
| Previous experience as a Volunteer: |
| Work Experience: |
| Courses or Training (if relevant): |
| Hobbies and Interests: |
| Do you have any Criminal Convictions (other than minor driving offences)? Yes / NoIf yes, please state date and nature of conviction |
| Are you willing to visit people in their own homes? Yes / No(Please note that expenses will be paid) |
| Approximately how much time would you like to give each week? Please indicate particular days or times |

|  |
| --- |
| If you would like to tell us anything else that you would like to tell us in relation to your volunteering application. Please use this space |

REHABILITATION OF OFFENDERS- having a criminal record will not necessarily be a bar to obtaining a position or placement and Westminster Mind will not unfairly discriminate against the subject of Disclosure of information on the basis of conviction or other details revealed.

|  |  |
| --- | --- |
| Have you ever been convicted of a criminal offence (declaration subject to the Rehabilitation of Offenders Act 1974). This should include being bound over or cautioned or are you currently the subject of a police investigation. | YES □ NO **□**  |

If you have been convicted of a criminal offence, please give details of the offence(s) that are not spent, including date(s) and sentence(s)

|  |  |  |
| --- | --- | --- |
| DATE | OFFENCE | SENTENCE |
|  |  |  |

|  |
| --- |
| DETAILS OF CAUTION OR BEING BOUND OVER: |

PROTECTION OF VULNERABLE ADULTS SCHEME - CARE STANDARDS ACT

|  |  |
| --- | --- |
| Have you ever knowingly been the subject of any investigation or enquiry into an allegation of possible abuse of a child or vulnerable adult? | YES □ NO **□** |

If yes please give full details and dates

|  |
| --- |
|  |

DISABILITY: West Central London Mind welcomes applications from all sectors of the community, including applicants with a disability. If you have a disability, please state in a covering letter (NOT ON THIS FORM) whether you would need any adjustments or arrangements to be made if you were invited to attend for interview.

IMMIGRATION AND ILLEGAL WORKING - The Immigration, Asylum and Nationality Act 2006 places an obligation on all employers to check applicant’s entitlement to legally work in the UK before any employment commences. Therefore should you be invited for an interview, you will be required to provide the necessary documentation proving your eligibility to be employed

|  |  |
| --- | --- |
| Do you have evidence of your entitlement to live and work in the UK ?  | YES □ NO □  |
| Do you require a work permit to work in the UK ?  | YES □ NO □  |
| Do you have a work permit to work in the UK? | YES □ NO □ If yes give expiry date: |
| Are you EEA nationals from Bulgaria, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Romania, Slovakia and Slovenia? | YES □ NO □  |
| If you are EEA nationals from Bulgaria, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Romania, Slovakia and Slovenia are you subject to registration or authorisation to work in the UK ? | YES □ NO □ If yes please give details: |

REFERENCES: Please give the names and addresses of two referees we can contact, one of whom should be your previous employer and must cover the last 3 years of employment. If your previous employment does cover the 3 year period you must give us additional referees. We will not normally take up references until after the interview.

|  |  |
| --- | --- |
| Name |  |
| Full addressPost code |  |
| E-mail (if known) |  |
| RELATIONSHIP (employer, manager, friend) | How Long Has This Person Known You? |

|  |  |
| --- | --- |
| Name |  |
| Full addressPost code |  |
| E-mail (if known) |  |
| RELATIONSHIP (employer, manager, friend) | How Long Has This Person Known You? |

DECLARATION

I declare that the information that I have given in this application is correct to my best belief and knowledge. I understand that my application may be rejected or any offer of volunteer placement withdrawn if I have given false information or withheld relevant details. I also understand that if it is found, subsequent to my appointment, that inaccurate details have been provided or relevant details withheld, this is liable to result in summary dismissal without notice or pay in lieu of notice. I consent to the Charity processing my personal data, as well as my personal sensitive data, given in this application (and on the Equal Opportunities Monitoring form) for the following purposes: my employment, administrative purposes and for complying with any laws, regulations and procedures.

|  |  |
| --- | --- |
| Signature  |  |
| Date  |  |

We attempt to acknowledge receipt of applications via email if you have given your email address.

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EQUAL OPPORTUNITIES

MONITORING FORM

This form does not form part of the selection process and will be detached on receipt of the application and held confidentially

We are committed to the operation of employment procedures and conditions that provide for equal opportunities. Our policy aims to ensure that unfair discrimination does not take place at any stage in recruitment and employment.

 In order to help us monitor the effectiveness of this policy, we would appreciate it if you could provide the information requested below. Any information provided will be confidential and stored and used in accordance with the Data Protection Act 1998 for the purpose of equal opportunities monitoring only. There is no legal requirement to keep information; however, such monitoring is considered good practice.

We appreciate that some people may find some questions personal and we therefore would like to make it clear that you are under no obligation to complete the questions that you do not wish to answer. If you do not wish to answer some questions this will not affect your application in any way. We do, however, ask that you return the form so that we can fulfil our equal opportunities monitoring requirements.

|  |  |
| --- | --- |
| NAME |  |
| POST APPLIED FOR |  |
| DATE |  |

1. GENDER

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ARE YOU  | FEMALE  |  | MALE  |   |

1. DISABILITY

The Equality Act 2010 defines disability as ‘a physical or mental impairment which has a substantial and long term adverse effect on the ability to carry out day to day activities’.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| DO YOU CONSIDER YOURSELF AS HAVING A DISABILITY? | YES |  | NO |  |

3 ETHNIC ORIGIN

What is your ethnic group? Choose ONE selection, and then tick the appropriate box to indicate your ethnic background. The classifications we have used are those recommended by the Commission for Racial Equality.

WHITE

|  |  |  |  |
| --- | --- | --- | --- |
| ENGLISH |  | SCOTTISH |  |
| IRISH  |  | WELSH |  |
| BRITISH or MIXED BRITISH  |  | OTHER (please state below)  |  |
| Any other white background. Please state  |

ASIAN OR ASIAN BRITISH

|  |  |  |  |
| --- | --- | --- | --- |
| BANGALDESHI  |  | INDIAN  |  |
| PAKISTANI  |  |  |  |
| Any other Asian background. Please state  |

BLACK OR BLACK BRITSH

|  |  |  |  |
| --- | --- | --- | --- |
| AFRICAN  |  | CARIBBEAN  |  |
| Any other BLACK background. Please state  |

MIXED

|  |  |  |  |
| --- | --- | --- | --- |
| WHITE AND BLACK CARIBBEAN  |  | WHITE AND BLACK AFRICAN  |  |
| WHITE AND ASIAN  |  |  |  |
| Any other Mixed background. Please state  |

CHINESE

|  |  |
| --- | --- |
| CHINESE  |  |

OTHER ETHNIC GROUP

|  |
| --- |
| PLEASE STATE: |