Volunteer Application Form

# Together, we can be bigger, bolder and better.

If you need support completing this form please contact 0207 380 6517 or email volunteering@versusarthritis.org

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| Volunteer role you are applying for: |
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| Date of Birth: | Preferred title:  | Full name: |
| *(DD/MM/YYYY)* | *(Mr/Mrs/Ms/Miss etc.)* |  |

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| Address: |
| **County:****Post Code:** |

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| Contact Number: |
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| **Email Address:**  |
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| Please indicate your availability to volunteer: (e.g. specific days/times or restrictions) |
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| Please provide us with details of a referee |
| **Name of referee:** **Organisation & position held:****Relationship to you:** **Address:** **Email:****Tel:**  |

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| Information in support of your Application  |
| *Please state briefly why you are interested in this role, why you would be a good candidate to volunteer within this team and describe how you meet the skills/qualities outlined in the role description.* |

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| Declaration of Criminal Record:  |
| As stated on the role description form, because of the nature of the duties thepost holder MAY be expected to undertake a criminal records check. You are required to disclose details of any criminal records,including convictions, reprimands and unspent convictions. Only relevantconvictions and other information will be taken into account, so disclosureneed not necessarily be a bar to obtaining this position.Versus Arthritis has a written policy on the engagement of ex-offenders asvolunteers, which is available on request. If you would like a copy, pleasecontact the Human resources Department. Having a criminal record will notnecessarily bar you from volunteering with us. This will depend upon thenature of the position and the circumstances and background of your offences.**Have you ever been convicted by the courts or cautioned, reprimanded****or given a final warning by the police?** (Note that the post you have appliedfor is excepted from the Rehabilitation of Offenders Act 1974, which meansthat all convictions, cautions, reprimands and final warnings on your criminalrecord need to be disclosed)Yes / NoIf yes, please give details of offences, penalties and dates: |

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| I can confirm the information provided is accurate and complete to the best of my knowledge:  |
| **Signed (typed signature will be accepted):****Date:**  |

**Thank you for your interest in volunteering with Versus Arthritis and for completing this application form.**

**Please return your completed form email it to** **Volunteering@versusarthritis.org**