

Volunteer Application Form

Surname:		First Name:			
Address:					
Telephone:		Today's Date:			
Email:					
Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>			
Age Group	Under 18 <input type="checkbox"/>	18-25 <input type="checkbox"/>	26-40 <input type="checkbox"/>	41-55 <input type="checkbox"/>	Over 55 <input type="checkbox"/>
<p>Please select the area you wish to volunteer in:</p> <p><i>(include opportunities specific to your organisation)</i></p>					
<p>Please tell us why do you want to volunteer with our organisation?</p>					
<p>Please tell us what you hope to gain from your experience with us?</p>					
<p>Please tell us about any educational background, work or volunteering experience that would be relevant to the volunteer role you are applying for.</p>					
<p>If you have volunteered before, please give details of where you have volunteered, for how long and describe your volunteer role.</p>					
<p>What hobbies, skills, special interests or qualities do you have that may be relevant to the volunteer role you are applying for?</p>					

When are you available to volunteer? (Please specify days, times and the length of commitment you would like to make)

References: Please supply us with the names of two referees (non-relatives)

Name:	Name:
Address:	Address:
Email:	Email:
Telephone:	Telephone:

Do you have any special needs you would like to share with us?

Any other comments:

For more information contact your local Volunteer Centre

