

Volunteer / Placement Student Application Form 2014/15

1. Your details

Full Forenames:

Surname:

Address:

Postcode:

Telephone number where you can be contacted during the day:

Home number (*if different from above*):

Mobile (*if different from above*):

Email address:

2. Next of Kin

Full name:

Relationship:

Address:

Postcode:

Telephone number:

Email address:

Present Employment

Please give a description of your current or most recent job

Employer's Name & Address:

Position held:

Date started:

Date of leaving (if appropriate):

Duties & responsibilities:

Reason for leaving (if this is NOT your current post): _____

Previous Employment

Start with your most recent jobs and work backwards

Include details of voluntary work and any periods of unemployment and/or travel. Mark clearly any college placements, etc. *Please continue on an extra sheet if necessary*

Employer's Name & Address:

Position held:

Date started:

Date of leaving (if appropriate):

Duties & responsibilities:

Reason for leaving:

Previous Employment (Continued)

Employer's Name & Address:

Position held:

Date started:

Date of leaving (if appropriate):

Duties & responsibilities:

Reason for leaving:

Previous Employment (Continued)

Employer's Name & Address:

Position held:

Date started:

Date of leaving (if appropriate):

Duties & responsibilities:

Reason for leaving:

Further & Higher Education

List details of all further and higher education and training undertaken.

School/College/Institution	Course undertaken	From	To	Qualifications

Personal Statement

Please use this space to answer the following questions:

1. What do you want to gain?
2. What skills you would like to develop?
3. What can you offer?

Please type or write clearly below or on a separate sheet – not more than two (2) pages, and attach to your application.

References

First Referee

Name:

Address:

Post code:

Telephone:

Email:

In what capacity do you know this person?

Second Referee

Name:

Address:

Post code:

Telephone:

Email:

In what capacity do you know this person?

DBS (OFFICE USE ONLY)

Disclosure number:

Date of issue:

Registered person/body:

Counter signatory:

Special note on DBS:

DECLARATION

I declare that the information contained in this application is accurate to the best of my knowledge.

Signature of Volunteer:

Date:

Signature of Staff:

Date:

Completed Applications and the Equal Opportunities Monitoring form should be sent by e-mail to: info@1communityproject.co.uk

The Equal Opportunities Form on the following page will be separated from your application. Please leave this page blank.

EQUAL OPPORTUNITIES MONITORING

1CP has an equal opportunities policy and is keen to ensure that it is working effectively. The information you provide will be treated in the strictest confidence and will only be used for statistical monitoring.

1. **Female** **Male**

2. **Age:**

3. **Ethnic Origin**

Black: African Caribbean Other _____

White: British European Other _____

Asian: Pakistani Bangladeshi Indian Chinese Other _____

Mixed Race: **Other:** _____

4. **Health Record**

Do you have a disability (yes or no)?

If 'Yes', please expand _____

Do you have any requirements to aid you at work (yes or no)?

If 'Yes', please specify _____

5. **Advertising**

Where did you hear about this opportunity?