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| **Volunteer Application Form** |  |

**Application for the role of ……………………………….**

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| 1. **Personal Information** | | | | | |
| Title: | Forename(s) | | | Surname: | |
| Known as: | | | | | |
| Any previous names by which you have been known: | | | | | |
| Male / Female: | | | Date of Birth: | | |
| Home Address:  Postcode: | | | | | |
| Daytime Tel No: | | Mobile Tel No: | | | Evening Tel No: |
| Emai address: | | | | | |
| How long have you lived at the above address? | | | | | |
| If less than 12 months provide previous address | | | | | |
| 1. **Education, Training, Qualifications Information** | | | | | |
| Please give a brief summary of any relevant training and qualifications which you feel equip you to Volunteer with children, young people and/or vulnerable adults. Please indicate dates. | | | | | |
| 1. **Employment and Voluntary experience** | | | | | |
| Please provide a brief outline of any relevant skills, interests and/or experiences when you have volunteered. | | | | | |
| If you have any experience of volunteering or working with children and/or vulnerable adults, please give a brief description including dates. | | | | | |
| 1. **Church Involvement** | | | | | |
| Please provide a summary (with dates wherever possible) of church involvement (current or previous) where appropriate: | | | | | |
| **5 Why do you want to volunteer?** | | | | | |
| Please tell us why you wish to volunteer?  Please tell us what skills, experiences and qualities you think you might bring to the role. | | | | | |
| **6.Health Information** | | | | | |
| Please provide information about any disability and/or health issues that you may have, so that we can identify any support and/or reasonable adjustments needed for you to undertake your volunteering duties safety. | | | | | |
| **7.Emergency Contact details** | | | | | |
| Please provide details of someone to contact in case of emergency. | | | | | |
| Emergency Contact Name: | | |  | | |
| Relationship: | | |  | | |
| Telephone Number(s): | | |  | | |
| **8. References** | | | | | |
| Please give names and addresses of two referees (*must be over 18)* , who know you well making sure that they are not members of Rochester Cathedral clergy, Rochester Cathedral staff or your own family members (suitable referees include former employers, teachers, clergy *(external to Rochester Cathedral*) or independent people who can give a view as to your experience or character).  If you are currently working/volunteering with children, young people or vulnerable adults, or have done so within the past two years, one of your references must be from the organisation. | | | | | |
| **Full name of first referee** | | | | | |
| Referee address:  Postcode | | | | | |
| Telephone number: | | | Email address: | | |
| In what capacity do you know this person: | | | | | |
| **Full name of second referee:** | | | | | |
| Referee address:  Postcode | | |  | | |
| Telephone number: | | | Email address: | | |
| In what capacity do you know this person: | | | | | |
| **9. Declaration:** | | | | | |
| I confirm that to the best of my knowledge the information I have provided on this form is correct and I accept that providing deliberately false information could result in my termination of my role as a volunteer.  I understand that I will be expected to undertake relevant Safeguarding training before starting my role.  I will be expected to undertake a volunteer induction and there will be a settling in period.  I understand that any offer of appointment to a volunteer role is subject to satisfactory pre-appointment checks as well as completion of a Confidential Declaration Form and satisfactory disclosure and Barring Service at the appropriate level, where this is a requirement of the role as stated on the role profile.  I understand that these details will be held in confidence by the Cathedral for the purposes of assessing this application and ongoing personnel administration in compliance with the Data Protection Act 2018. I undertake to notify the Cathedral immediately of any changes to these details. | | | | | |
| Signed: | | | | | |
| Print full name: | | | Date: | | |
| All completed forms to be sent to [sandy.struben@rochestercathedral.org](mailto:sandy.struben@rochestercathedral.org) or can be posted to:  Sandy Struben, Volunteer Manager, Garth House, The Precinct, Rochester. Kent ME1 1SX | | | | | |