



VOLUNTEER APPLICATION FORM

Personal Details:

Name.....
Address.....
.....
.....
Post Code.....

Email Address:
Would you like to receive our E-News letter? Yes / No
Home phone No:.....
Mobile No:.....
Work Phone No:.....

Emergency Contact Details:

Name.....
Relationship to you:.....
Home phone No.....

Mobile No:
Work Phone No.....

Skills & Interests:

Current Occupation.....
Skills that could relate to working with the homeless.....
Hobbies/interests.....
.....

Previous Volunteer Experience: (Use another sheet if there is not enough room.)
.....
.....

Are you trained in:

- Child Protection....
- First Aid.....
- Counselling.....
- Food Hygiene.....

Do you have a current CRB?

Yes / No

At what times are you available: (Please tick all relevant boxes).

Flexible Weekdays Weekends Evenings

Specific Times.....

Please supply details for 2 References:

Name.....	Name.....
Address.....	Address.....
Tel:.....	Tel:.....

Signed..... Dated.....

(Please return this form to the address detailed below when completed.)

We would like to send you our up to date information, but if you do **not** wish to receive it, please cross here.

Data Protection Act: -

The details on this sheet will not be sold or passed to any other organisation, company or individual, outside the staff of Off The Fence, with out your written permission.



Medical Details

Doctor's Name: _____

Address: _____

Postcode: _____

Telephone No: _____

Allergies: _____

Medical Conditions: _____

Prescribed Medication: _____

Disabilities: _____

- I understand that anything which I may hear or learn concerning individual clients during my work as a volunteer, must be treated in the strictest confidence and not divulged to any external party. I also understand that I have a general duty of confidentiality whilst volunteering with Off The Fence.
- I declare that information given above is correct and that I have not omitted anything that is relevant to my volunteer work.
- I agree to abide by the Volunteer Guidelines.

Signed:

Date: