

Date: _____



Application for Voluntary Work

IN CONFIDENCE

Thank you for your interest in volunteering for Axminster and Lyme Cancer Support. Please complete this form and return it to volunteer@axminsterandlymecancersupport.co.uk or by post to the address at the bottom of the form.

Personal details

Name	
Address	
Postcode	Mobile
Email Address	Date of Birth

Emergency contact details

Name	Contact No.
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Please say why you would like to volunteer at Axminster and Lyme Cancer Support.

Please give details of your skills, qualifications and past work experience (include dates).

Please state what you would like to gain from your voluntary experience.

How many hours (approx.) would you like to spend volunteering each week?		Which days are best for you? Are there any days when you cannot attend?	
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Please indicate below if you are interested in any of the following areas of volunteering at Axminster and Lyme Cancer Support

- | | | |
|--|---|--|
| <input type="checkbox"/> Drop-In (Tea, coffee, washing up) | <input type="checkbox"/> Buddying 1-1 | <input type="checkbox"/> Administration |
| <input type="checkbox"/> Fundraising (one off events) | <input type="checkbox"/> Information and research | <input type="checkbox"/> Collection pots |
| <input type="checkbox"/> Driving | <input type="checkbox"/> Helping at workshops | <input type="checkbox"/> Sewing/crafts |

Any other specific skills you would like to offer:

Please say how you heard about Axminster and Lyme Cancer Support.

Do you have any particular needs such as health conditions, disabilities, including medication, that we should be aware of?

Have you previously done any voluntary work? Yes No

If Yes, please indicate where this was

Do you currently take part in special activities, activities or hobbies?

Certain roles are exempt from the Rehabilitation of Offenders Act 1974. If you are applying for one of these roles, you will be required to declare your convictions. Otherwise, the provision of the Rehabilitation of Offenders Act 1974 will apply.

Do you have any criminal convictions or any pending? Yes No

If invited to interview, we ask that you provide details of your criminal record. We request that this information is sent under separate confidential cover to the Volunteer Manager. We guarantee that this information will only be seen by those who need to see it as part of the recruitment process.

Having a criminal record will not necessarily bar you from working with us, but we may need to delay the start of volunteering should we need to see a certificate from the Disclosure and Barring Service.

REFEREES

Please give the names of two people who know you well, but are not directly related to and to whom we can write for references.

Name	Tel No.
Address	
Email Address	Relationship

Name	Tel No.
Address	
Email Address	Relationship

I understand that any work offered would be on a voluntary basis and that I will not be an employee of Axminster and Lyme Cancer Support.

Signature		Date	
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We would like to be able to send you information about volunteering roles and events at Axminster and Lyme Cancer Support. All information provided to us in this application will be in strictest confidence, in accordance with current data protection legislation. A copy of our Privacy Policy is available on our website. Please tick here to give your permission for us to contact you via email about relevant services

Please tick here to give your permission for us to contact you via letter or phone call about relevant services or information regarding your volunteering role

Please note your data will not be used for marketing or fundraising purposes.

This form should be returned to: Axminster and Lyme Cancer Support, Heathermoor, Yawl Hill Lane, Yawl, DT7 3RW