

Volunteer Application Form

Section One - Personal Details

Title:	Forename:		Surname:
Address:			
Home Number:		Mobile Number:	
Email:		D.O.B	
Preferred Contact Method:			
Home: 2			
Mobile: 2			
E-mail: 2			

Section Two – Experience

Please give a brief description of any previous work (paid or unpaid) that you have undertaken that you have undertaken starting with the most recent.

Dates:	Organisation:	Main Duties



Dates:	Organisation:		Main Duties:
Section Three – Character & Comm	nitment		
Please give description in each	n table to show wh	at type of pers	son you are i.e. trusting, caring
(examples desirable)			,
My Characteristics:		Example:	
		·	
Example's to support that you'	re committed:		



Section Four – Engaging with Young People

Please give details of how you would engage with Young People (Include Example of past experiences if applicable).
Please give details of any other relevant experience and or specialist skills that you feel are relevant to your application.



Section Five - Your Interests

Please select which area of Voice for Children in Partnership with the YES Service are you interested in gaining experience:
Mentoring 2
Please give a brief description of what attracted you to Voice for Children in Partnership with the YES Service and how you heard about us:



Section Six- References

Please provide details of two people willing to give you a reference. These can be character, education or previous employers.

Referee One:

Title:	Forename:	Surname:	
Relationship to You:			
Position/Job Title:			
Address:			
Contact Number			
Email:			
Referee Two:			
	Τ_	1.0	T
Title:	Forename:	Surname:	
Relationship to You: Position/Job Title:			
Address:			
Contact Number			
Email:			



Section Seven -Disclosure and Barring

To undertake work involving children, young people and vulnerable adults it will be necessary to for you to undergo a Disclosure and Barring Service Check.

Please indicat	te below if you have any unspent convictions:
Yes: 2	No: 🛽
Please Indicat	te Below if you have any spent convictions:
Yes: 2	No: 2
If yes for eithe	er of the above, please give some brief details:

Previous convictions will not necessarily exclude you from becoming a mentor. Voice for Children are trying to encourage people who have some personal experience of the care system or justice system or what it means to be a young person in trouble & being able to say "I know what it's like". Likewise, you don't have to have had these experiences to volunteer for us.

If it becomes apparent at a later date that you have failed to disclose relevant information at the application process, Voice for Children reserves the right to terminate your volunteering post without notice.



Section Nine – Ethnicity & Disability

Ethnicity and Disability Questionnaire

Whilst it is not compulsory that the following section is completed, the footnote at the end of this form explains why it is important.

ETHNICITY In order to help monitor/support Voice for Children mentors, please would you tick one of the following boxes to identify your ethnic group/origin:

A White British □ Irish □ Any other white background (please specify) □
B Mixed □ White Caribbean □ White Asian □ White & Black Africa □ Any other mixed background (please specify)
C Asian or Asian British □ Pakistani □ Indian □ Bangladesh □ Any other Asian background (please specify) □
D Black or Black British ☐ Caribbean ☐ African ☐ Any other Black background (please specify)☐
E Chinese or other ethic group Chinese Any other (please specify)



of mental impairment, which has a substantial and long term adverse effect on his or her ability to carry out normal day-to-day activities'.
Do you consider yourself to have a disability? Yes □ No □ If yes what is the nature of your disability? Visual impairment □ Hearing impairment □ Physical disability Learning disability □ Multiple Disability □ Other □ (Please specify):
Section Ten – Summary:
This section confirms that you have read and understood the application form and your answers are accurate and truthful to the best of your knowledge:
By ticking this box you confirm that your answers are accurate and truthful to the best of you knowledge: $\ensuremath{\mathbb{Z}}$
By ticking this box you understand that Voice for Children will keep your details on record in accordance with Voice for Children's Data Protection Policy and the Data Protection Act of 1998 $\ \ \ \ \ \ \ \ \ \ \ \ \ $
Please Sign and Date Your Application Below:
Name: Date:
Signature: