

New Volunteer information / Volunteer update form

Title: _____ Name: _____ DOB: _____

Home Tel: _____ Mobile: _____

Address: _____

_____ Postcode: _____

Email: _____

Please tick below to highlight the activities you are volunteering for:

Monday Afterschool Youth Café ☐

Volunteer driver ☐

Holiday activities ☐

Radio / Research ☐

Please detail any specific skills, which you would like to use at our projects: _____

DBS Information:

Do you have a DBS check? Yes ☐ No ☐

Is the DBS registered online? Yes ☐ No ☐

Date of issue: _____ DBS Number _____

Issued by : _____

Qualifications:

Do you have a current first aid certificate? Yes ☐ No ☐

Date of issue: _____ Renewal date: _____

Do you have a current food hygiene certificate? Yes ☐ No ☐

Date of issue: _____ Renewal date: _____

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Please tell us of any allergies/medical conditions: _____

Emergency contact information

Name: _____ Tel: _____

References: Please provide information on two people that can provide a character reference for your volunteer application:

Reference	Name	Email	Telephone/Mobile
1			
2			

Photography: We would like your permission to photograph you for possible inclusion in our publications, website and other publicity material. Your contact details will remain strictly confidential.

I give permission for photographs to be taken and used as stated above.

Signed: _____ Date: _____

Tick the boxes below if you would like to:

Attend the volunteer planning meetings and social events

☐

Receive Youth Café publicity and new letters

☐

Find out about training opportunities

☐

Help us raise funding for the Youth Projects in the area

☐

Signed _____ Date _____