

# Volunteer Application Form

## Personal Details

<b>Full Name</b> <small>(including title)</small>	<input type="text"/>		
<b>Address</b> <small>(including postcode)</small>	<input type="text"/>		
<b>Telephone</b> <small>(including STD code)</small>	<input type="text"/>	<b>Contact Name</b> <small>(emergency use only)</small>	<input type="text"/>
<b>Mobile</b>	<input type="text"/>	<b>Contact Telephone</b> <small>(including STD code)</small>	<input type="text"/>
<b>Email</b>	<input type="text"/>	<b>Contact Mobile</b>	<input type="text"/>

## Application Information

**Position Applied For**  
(if specified)

**Your Availability**  
(Please tick as appropriate)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Varies
<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/>

**Experience, learning and skills:**

please continue on a separate sheet if required

**Information to support your application:**

please continue on a separate sheet if required

**Why do you wish to volunteer with Wesley Owen?**

please continue on a separate sheet if required

## Application Information (continued)

Give details of your own Christian experience and involvement you may have had with any Christian organisation, including your local church:

please continue on a separate sheet if required

## Rehabilitation of offenders Act 1974

Do you have any unspent convictions?  YES  NO

If yes, please specify:

Please note that a conviction will not necessarily exclude you from volunteering with Wesley Owen, but will be taken into account when assessing your suitability.

## References

If you have worked in the past five years, at least one reference should be obtained from your last employer. If not, give the names of people who you know well, if possible including a church leader.

### Referee One

Name  
(including title)

Address  
(including postcode)

Telephone  
(including STD code)

In what capacity do you know referee one?

### Referee Two

Name  
(including title)

Address  
(including postcode)

Telephone  
(including STD code)

In what capacity do you know referee two?

Do you have a health problem, disability or impairment that is relevant to your application?  YES  NO

## Declaration

I understand that any offer of volunteering with Wesley Owen is subject to satisfactory references, and binding in honour only.

In accordance with the 1998 Data Protection Act, I agree that Wesley Owen may hold and use personal information about me for volunteering reasons and to keep in touch with me. This information, including that contained in this form can be stored on both manual or computer files. It will be held securely and only accessed by authorised personnel.

Signature

Date