## Volunteer Application Form

**How to apply**

Please fill in this application form, clearly stating which volunteering role you are interested in. Usually, volunteer opportunities are advertised on our website at [www.mindinkingston.org.uk](http://www.mindinkingston.org.uk).

Fill out the application form and return it to us either by email to volunteering@mindinkingston.org.uk, if you have not been told to send it to a different member of staff, or by post to Mind in Kingston, The Old Post Office, 1 Brook Street, Kingston Upon Thames, KT1 2HA.

**What will happen next?**

We will invite you for an informal interview to find out if you are suitable for the role you are applying for. You will have the opportunity to find out more about Mind in Kingston, and discuss the type of skills you have and your availability. You will be given a trial period to see if you like the role and if it is right for you.

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| **Contact Details:**  |
| Prefix: Miss/Mr/Mrs/Ms/Mx (please delete as appropriate) or Other (please state):  |
| First Name: Surname:  |
| Address: |
|  |
|  |
| Date of Birth:  | Tel/Mobile: |
| Email: |
| **Application Information** |
| Which Volunteer role are you applying for? |
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| How many hours per week would you like to Volunteer? |
| Your Availability(please tick as appropriate) |  | am | pm |  | am | pm |
| Monday |  |  | Friday |  |  |
| Tuesday |  |  | Saturday |  |  |
| Wednesday |  |  | Sunday |  |  |
| Thursday |  |  | Varies |  |
| Would your volunteer role be part of a training course or work placement scheme you are taking part in? If yes, please give details:  |
|    |
| **Eligibility to Volunteer** |
| Are You over 18? |  |
| Are you a UK Citizen?If not, can you show evidence of eligibility to volunteer in the UK?  | Yes/ No  |
| **About You** |
| Why do you want to volunteer for us? Are there any particular skills or experiences you would like to gain? |
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| What do you do at the moment? E.g. studying, working, looking for work.  |
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| Please give FULL DETAILS of work (paid or unpaid) you have done in the last 5 years Alternatively, please include a CV with your application. |
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| What do you like to do in your spare time?  |
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| What languages do you speak and at what level? |
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| **More About You**  |
| We work with people who experience a range of enduring mental health issues. We have a responsibility to ensure that both service users and volunteers are safe and that volunteer roles do not jeopardise you or your own mental wellbeing. Answering ‘Yes’ to any of the following questions will not exclude you from volunteering with us, but will be taken into account for certain roles, avoiding conflicts of interest and ensuring you receive appropriate support whilst volunteering.  |
| **Are you currently using, or have you previously used our services?**  |
|   |
| **Are you currently using, or have you previously used substance misuse services?**  |
|   |
| **Are you currently using, or have you previously used mental health services?** |
| **If yes, please give details.** |
| **Do you have any physical health problems, which may affect you whilst volunteering?** |
| **If yes, please give details.** |
| **Is there anything you may need additional support with whilst carrying out a volunteer role?** |
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| We work with vulnerable adults and are therefore exempt from Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (exceptions) Order 1975. We therefore require that you declare all criminal convictions, including those which are spent. **Do you have any spent or unspent convictions? Yes/No** |
| **If you have answered ‘yes’, please give details below.** |

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| **References** |
| Please provide details of 2 referees who have known you for at least 2 years. One of these must be a professional person such as a current or previous employer, tutor/ teacher or student advisor. The other referee can be someone you have worked or studied with. None of the referees should be a relative.Referees will not be contacted unless we have offered you a volunteer position. |
| Name: Postal Address: Email address:Contact No:Their connection to you:  | Name: Postal Address: Email address:Contact No:Their connection to you: |

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| **Declaration** |
| I understand that the offer of any volunteer role with Mind in Kingston is subject to satisfactory references and, where appropriate, a DBS check.In accordance with the 1998 Data Protection Act, I agree that Mind in Kingston may hold and use personal information about me for volunteer reasons and to keep in touch with me. This information, including that contained on this form, can be stored on both manual and computer form. It will be held securely and only accessed by authorised personnel.I confirm that the information I have given is accurate. |
| **Signature** |  | **Date** |  |

If you have any problem in completing this form, or would like it in an alternative format, please feel free to contact us on 020 8255 3939.

Thank you for your interest in volunteering with us.

**For office use only**

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| --- | --- | --- | --- |
| Date received | Received by | Date responded | DBS required? |
|  |  |  | Yes o No o |