#### **VOLUNTEER APPLICATION FORM**

#### Please email the completed form to: [befriending@cheer-elmbridge.org.uk](mailto:befriending@cheer-elmbridge.org.uk).

#### If you have any questions or would like more information, please call Ellie on 07716 854383.

#### Your Personal Details

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | | | Date of birth: |
| Permanent Address: |  | Home Telephone Number:  Mobile Telephone Number:  Email address: | |
|  |  |
| Do you hold a current driving licence? **Yes**  **No**  Have you received your Covid vaccines? **Yes**  **No** | | Do you have the use of a car? **Yes**  **No**  Where did you hear about CHEER? | |

#### Volunteer Roles

|  |  |
| --- | --- |
| There are a variety of activities, events and projects you can get involved in to help CHEER support older people.  Please tick the role that most interests you: | |
| Volunteer befriender  Home Assessment Volunteer  Helping with the CHEER Parkinson’s group | Attending CHEER events with clients, including driving them to and from their home |

Have you had a COVID vaccination? Yes No

#### Skills and experience

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| --- |
| Please tell us about any skills, previous experience, interests or hobbies you think might be relevant to the role: |

#### Qualifications/Training

Please tell us about any qualifications or training courses you have done which you think are relevant to supporting older people:

|  |  |  |
| --- | --- | --- |
| Qualifications/Training Courses | Organising Body | Dates |
|  |  |  |

#### References

Please provide us with the names and addresses of two referees (not relatives), who have known you for the past five years.

|  |  |
| --- | --- |
| Name and address | Name and address |
| Telephone Number: | Telephone Number: |
| Email: | Email: |
| Relationship to you: | Relationship to you: |

#### Disclosure and Barring Service (DBS) Check

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| --- |
| Given the sensitive nature of our work, and in accordance with the Rehabilitation of Offenders Act 1974 (Exemptions Order 1975), we require all volunteers who are likely to have one-to-one interaction with our clients to apply for a DBS check, which is free for volunteers.  Do you give us your permission to carry out a DBS check? **Yes**  **No** |

#### Data Protection Act

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| --- |
| Information from this form may be used and stored on a computer file on the CHEER Computer system. In order to comply with UK Data Protection Legislation, we need to ensure that we have your consent to store information on our secure database. We will not share such information with third parties unless we have a suitable authority or a legal duty to do so. Please indicate that we may:  Keep information from this form on the CHEER Computer System: **Yes**  **No**  Send you updates about your volunteering and CHEER activities: **Yes**  **No**  Signed: ....................………………………………………............. Date: .................................................. |

Thank you for your interest in volunteering with us. We will be in touch with you soon.