

## Volunteer Application Form

**Personal Details** 

Thank you for your interest in volunteering for Calvert Trust Exmoor. Please complete this form and return to the address provided. If you need assistance completing the form, please contact us and we will be happy to help.

The information you provide is strictly confidential. We welcome applications from people of all abilities, backgrounds and communities. Calvert Trust Exmoor abides by the Data Protection Act 2018 and operates an Equals Opportunities policy.

Surname:					
Title (Miss/Mrs/Mr/etc)	Forenames:				
Address:					
	Post Code:				
Email:	Date of Birth:				
Tel: (Home)	Tel: (Mobile)				
Do you have a current driving licence?		Yes / No			
Do you have any driving convictions / points?		Yes / No			
Do you have a licence to drive a minibus?		Yes / No			
Disabilities, Medical or Dietary Requirements					
Do you have a disability? Are there any medical or					
Would you be able to evacuate the building in under 3 minutes in the event of fire, might you have any adverse reactions to loud noises, allergies etc – please specify:					
arry adverse reactions to load holises, allergies etc – please specify.					

## Age restriction

For Health & Safety reasons, we can only accept volunteers over the age of 18 years old.

Which Volunteer R	oles are you int	ereste	d in? (P	leas	e tick all that	are relevant):	
Activities (other than	Activities (other than stables)			Sta	ables		
Fundraising	,			Events			
Gardening				Maintenance/Groundswork			
Companionship				Off	ice/Admin/Fin	ance	
Housekeeping				Catering			
Please state your F	Preferred Activit	y:	L				
_							
Г							
When are you able				app		<u> </u>	
	Morning	Afte	ernoon		Evening	Comment	
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
· · · · · · · · · · · · · · · · · · ·	I	1		J			
How often would ye	ou like to volun	teer?	(Please	tick	the appropria	ate box/es):	
Weekly				For	tnightly		
Monthly				Other (please specify below)			
							*
If called for a chat, access, large print						help you attend? e.g., ra	mp
How did you hear a							
	volunteered for	Calvert	t Trust I	Exm	por in the pas	st, or any of our sister	

<b>Criminal Convictions</b>					
Have you ever been conv	victed in any Court of any C	Criminal Off	ence?		Yes / No
If yes, please give details	S:				
Disclosure and Barring	Service Check (DBS) – fo	ormerly kn	own as a CRE	3 check	
N.B. Under the provision of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975, applicants are required to disclose information concerning all convictions including 'spent' convictions. Failure to disclose relevant information could result in dismissal or disciplinary action. Some of our volunteer roles will require the satisfactory completion of a Disclosure and Barring Service Check (DBS) as to the existence and content of a criminal record of persons where the opportunity exists for substantial and unsupervised access to children and people with disabilities. Any information will be treated in strict confidence and will be considered only where it is felt to be relevant to a particular job or situation. Your permission will be sought to carry out the Police check following an offer of appointment, but you should realise that refusal to give permission could prevent confirmation of your appointment.					
Have you completed a D	BS check in the last 12 mo	nths?			Yes / No
Please tick here to confir	m your consent to a DBS o	check where	e appropriate.		Yes / No
Emergency Contact De Name Relationship to you Address	tails		Post Co	ode:	
Tel: Day		Tel: Eveni	ng		
•	erests of Calvert Trust Exm I to you by blood or by mar	•	ed to ask you t	o provide de	etails of a
Tel:		Email:	Post Co	ode:	
How do you know this					
person?					

Personal Declaration					
I declare that the information provided is, to the best of my knowledge, true and complete.					
I agree that the failure to disclose relevant information may render this application and any subsequent applications invalid. In accordance with the Data Protection Act 2018, I agree that Calvert Trust Exmoor may hold and use the data provided in this form for the purpose of administering and supervising my work with the charity. I confirm I have read the Volunteering Policy. I understand that Calvert Trust Exmoor hold the right to terminate my placement as a volunteer at any time; there is no formal contract of employment. However, we will expect you to comply with the relevant parts of the Code of Conduct in our Staff handbook. You will be made aware of these as part of the induction process.					
All of the above information is to the best of my knowledge, correct. I will inform Calvert Trust Exmoor of any relevant changes to my medical circumstances, and give my consent for emergency treatment, including anaesthetic, as considered necessary by the medical authorities. I am aware of the nature of the activities, in that there is an element of risk and I voluntarily accept the risks involved.					
Please tick if you DO give permission for your photograph to be used in any Calvert Trust Exmoor publicity, marketing, printed material or website					
To hear from us about news, fundraising, accessible breaks and activities, and how you can help support people with disabilities at Calvert Exmoor, please confirm how we can contact you by ticking the relevant box.  If you change your mind, email exmoor@calvert-trust.org.uk or phone 01598 763221 to update your preferences. For more information about how we use data, visit our online Privacy Policy.					
Name (BLOCK CAPITALS):					
Signed:					
Date:					

## Please return this form to:

Alison Perry
Volunteer Co-Ordinator
Calvert Trust Exmoor
Wistlandpound
Kentisbury
Barnstaple
North Devon
EX31 4SJ

Telephone: 01598 763221

Email: alison.perry@calvert-trust.org.uk Email: volunteer@calvert-trust.org.uk Website: www.calvertexmoor.org.uk

Charity No. 1005776

