



Headway South Staffordshire

APPLICATION FORM FOR VOLUNTEERS

Personal Details (in block capitals please)

Mr/Mrs/Miss/Ms _____

Address _____

Post Code _____ Home Tel no _____

Daytime / mobile no _____

Person to contact in case of emergency and phone no _____

If you have any illness or disability of which you would like us to be aware, please give details:

Any special dietary requirements:

Availability

Please give details of any existing work/voluntary commitments:

Headway South Staffordshire Day Centre operates on Monday, Tuesday, Wednesday Thursday and Friday from 10.00 am till 3.00 pm

Please circle days you would be available:

Monday Tuesday Wednesday Thursday

Headway aims to promote equal opportunity for all with the right mix of talent, skills and potential. Headway welcomes applications from diverse candidates



Experience : What skills and experience can you bring to Headway?
Previous employment, voluntary work, training, relevant personal experience, interests
(brief details please)

Volunteering:
Why do you want to be a Volunteer with Headway?

What do you think Headway can offer you?

Referees

Please give us the names and addresses of two people who can be asked to provide references. References will not be taken up until after interview.

Name _____ Name _____

Address _____ Address _____

Telephone No _____ Telephone No _____

Headway seeks to use this information for legitimate purposes only. It is treated in the strictest confidence. I give my consent to store my details in Headway's record system.

Signed: _____ Date: _____



For office use:

Date and details of Interview

Date Volunteer Information Pack given and Confidentiality form signed

CRB completed

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