**Volunteer Role Application Form**

*Please complete this form in black ink.*

**Personal Information**

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| **Title (Mr/Mrs/Miss/Ms):**  |  |
| **First Name:** | **Surname:** |
| **Address:** | **Postcode:** |
| **Date of Birth:** | **Email Address:** |
| **Contact number:** | **How would you preferred to be contacted?**Email Text Phone (Please circle) |

**Which voluntary role are you applying for?**

\*Please note we can only offer opportunities to volunteers over the age of 18 years.

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| **Role Title:** |

**Please give a brief description of why you would like to join us as a volunteer** *(please give details of any previous experience or skills you might have - work or personal. Please also include your availability)*

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**Ideally, we would like the details of two referees who you know well and are not related to you.** *Please be aware that we may contact your referees to assist us with your application.*

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| --- | --- | --- | --- |
| **Name:** |  | **Name:** |  |
| **Address:** |  | **Address:** |  |
| **Phone No:** |  | **Phone No:** |  |
| **Email:** |  | **Email:** |  |
| **Relationship to you:** |  | **Relationship to you:** |  |

**Declaration of a criminal record.**

Have you any unspent criminal convictions? (This does not automatically exclude you from being considered) **YES** **NO** (Please Circle)

If yes, please provide details of all offences, penalties and dates on a separate sheet of paper and return this form in a sealed envelope marked Private and Confidential. You will be asked to complete a Disclosure and Barring Service (DBS) form electronically if you have regular contact with vulnerable people in your role.

**Do you have a current, clean driving licence? YES NO** (Please circle)

**Do you have access to a car you would be prepared to use your car in your voluntary work? YES NO** (Please circle)

**How did you hear about volunteering with us?**

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**Photo/Video/Audio Consent**

Photographs, audio and video may be taken during Norfolk and Waveney Mind activities and used for marketing purposes, including use on our Website, Facebook, Twitter and Instagram pages.

Are you are happy to be included in photographs/video/audio? **Yes No** (Please Circle)

**Volunteer Newsletter**

Would you like to receive our monthly Volunteering Newsletter? (You can withdraw consent at any time. Please visit our website for more details: <https://www.norfolkandwaveneymind.org.uk/about-us/privacy-statement>.) **Yes No** (Please Circle)

**GDPR Statement**

To help with your application and any future voluntary work with Norfolk & Waveney Mind we will need to record your details. These will include *personal* data*,* e.g. your name, DOB, address, as well as *sensitive* data e.g. health and medical conditions. To comply with Data Protection we must ask your permission to store and process your personal and sensitive data. For full details of how your data will be stored and used, as well as your rights as an individual, please view our Privacy Statement on our website: <https://www.norfolkandwaveneymind.org.uk/about-us/privacy-statement>.

* **I confirm that the information given on this form is complete and accurate.**
* **I give consent for Norfolk and Waveney Mind to record, process and store my *personal* and *sensitive* data for the purposes of this application and future voluntary work.**

**Name: Signature: Date:**