

# VOLUNTEER APPLICATION FORM



**TALK Surrey CIO**  
Registered Charity TALK Surrey CIO. No: 1176014



**Please read these notes before completing this form:**

1. Please complete this form using BLOCK CAPITAL letters if completing a hard copy.
2. Please answer questions as fully as you can. Delete answers (yes/no) where applicable. If the answer is not applicable, please write n/a
3. All applicants who meet the requirements advertised will be given fair and equal consideration, regardless of race, sex, colour, creed, nationality, ethnic origin, marital status, sexual orientation, religion, age or disability.
4. References will be sought. Please note, no reference will be sought without your consent.
5. Information provided by you will be treated in the strictest confidence.

**ALL APPLICANTS MUST COMPLETE THIS FORM**

**Personal Details**

|  |                   |
|--|-------------------|
| Surname:   | Forenames:        |
| <input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Ms <input type="radio"/> Miss <input type="radio"/> Other | Home Telephone:   |
| Address:   | Mobile Telephone: |
| Postcode:  | Email:            |
| Next of Kin Details (for contact in an emergency)  | Address:          |
| Surname:   | Postcode:         |
| Forename:  | Home Telephone:   |
| Relationship:  | Mobile Telephone: |

**Skills and Experience**

|   |   |
|---|---|
| What are your main areas of interests/skills? | Please give details of any previous or current experience of volunteering |
|---|---|

## VOLUNTEER APPLICATION FORM

Why do you want to volunteer for us?

Which day(s) are you able to volunteer?

- Monday Afternoon Walton
- Tuesday Morning Guildford
- Tuesday Afternoon Guildford
- Wednesday Morning Ashford
- Thursday Knaphill

Would you prefer:

- Group Workshops
- Home Visits
- Multiple groups when needed
- Fundraising

### References

Please give the names and contact details of two referees who we can ask to support your application. Referees must not be family members and will have been known to you for at least two years.

FIRST REFEREE

Name:

Address:

Postcode:

Telephone no:

Email address:

Relationship to you:

Length of time known to you:

SECOND REFEREE

Name:

Address:

Postcode:

Telephone no:

Email address:

Relationship to you:

Length of time known to you:

### Disclosure and Barring Service Checks and Rehabilitation of Offenders Act (1974)

Due to the nature of the work at TALK we reserve the right to obtain an enhanced DBS disclosures for all volunteers working for the charity. Our lawful basis under GDPR for processing this data is Legitimate Interest, in line with the requirements of the Data Protection Act 2018 Schedule 1 Part 2 *Safeguarding of individuals at risk (18-1, 2, 3, 4)*.

Rehabilitation of Offenders Act 1974: Having a criminal record will not necessarily bar you from volunteering with us, depending on the circumstances and discussion with you. We ask you therefore to declare below any previous convictions (spent or unspent). Any information will be completely confidential.

Declaration

Do you have any previous convictions? YES / NO

If Yes, please give details below

## Supporting Information

Use this space to provide any information which may be of interest and help to place you as a volunteer

To the best of my knowledge all the information I have given is true. I give my consent for my personal information to be processed in relation to my application for volunteering in line with the Data Protection Act 2018, I understand the information given in this form will only be used by TALK in relation to my application for volunteering. By signing this declaration, I am giving my express consent for you to retain and process this information under the Data Protection Act 2018.

Signature:

Date:

**Please return this completed form to:**

**Sharon Spurdle Operations Manager, 4 Beech Road, Farnborough GU14 8EU**

**Or electronically to:**

**[info@talksurrey.org.uk](mailto:info@talksurrey.org.uk) If returning electronically, please print and scan a signed copy**