**Volunteer Application Form**

**Please email your completed volunteer application form to:** **volunteering@solacewomensaid.org**

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

Please complete all sections of the application form.

At Solace we are committed to creating a diverse and inclusive environment for our volunteers. The Service Users we support come from all backgrounds and we want to reflect that in our volunteering team.

We are happy to consider any adjustments you might need to support you in your role or in completing this application form. If you would like to discuss this further with the volunteer team, please contact us at volunteering@solacewomensaid.org. This will not affect your application.

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| **Personal Information** |

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| **Volunteer Position**(Please state clearly which role you are applying for) |  |

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| --- | --- | --- | --- |
| First Name (s)  |  | Title  |  |
| Last Name  |  |
| Previously used name(s)  |  |
| Address |  |
| Telephone Number(s) | Home |  |
| Mobile |  |
| Work  |  |
| Email  |  |

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| **Present Employment or Volunteer Work Experience** |

 (Please give details of your present or last position)

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| --- | --- |
| Employer/Organisation |  |
| Address |  | From: (month, year)  |  |
| To: (month, year) |  |
| Telephone Number(s) | Home |  |
| Mobile |  |
| Work  |  |
| Email  |  |
| Summary of key responsibilities:  |

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| **Skills & Availability** |

### **Languages**

Other than English, please state any other languages you speak

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## **Availability**

Please mark with times/days of the week you would be available

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Mon | Tues | Wed | Thurs | Fri |
| Morning |  |  |  |  |  |
| Afternoon |  |  |  |  |  |

**Specific Skills, Training, Qualifications Related to Role**

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| **Personal Statement** |

Please explain why you might be suitable for the Volunteer Role and why you would like to volunteer with us. We are looking for knowledge and experience as outlined in the Volunteer Role Description, any relevant work experience (paid or unpaid), knowledge and personal qualities that would be applicable to this specific Volunteer role.

**Continue on a separate sheet if necessary. No more than TWO SHEETS will be considered.**

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| **Volunteering Availability** |
| **The helpline opening hours are:  Monday 10-2pm, Tuesday 10-2pm AND 6-8pm, Wednesday 1-5pm, Thursday 1-5pm, Friday 10-2pm**We are asking for a commitment of volunteering for a fixed helpline shift weekly for roughly a year (as far as is possible) for these shifts.Please Indicate your preferred volunteering shift below: |
| **Monday 10am – 2pm** |  |
| **Tuesday 10-2pm** |  |
| **Wednesday 1-5pm** |  |
| **Thursday 1-5pm** |  |
| **PLUS Tuesday 6pm-6pm (shift is available after 3 months volunteering in person as this shift is always remote\*)** |  |

\*There is an option to move to volunteering remotely for all shifts after all training, shadowing and 3 months of volunteering is completed in person and the volunteer confirms that they have a private safe space and feel comfortable to do so.

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| **Please confirm that you are available for the following training dates:** |
| **Friday 31st January** |  |
| **Saturday 1st February** |  |
| **Friday 7th February** |  |
| **Saturday 8th February** |  |

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| **References** |
| References will be taken up once an offer for a volunteer role has been made and verbally accepted. Please give TWO referees, one primary and one reserve, in case we are unable to get hold of your primary referee. Please indicate in what capacity they are known to you. Your reference should be from **EITHER** a professional (previous job or voluntary work) **OR** from education i.e. school, college etc. **Please do not use friends, family friends or family members****All references will be requested by email so please ensure you have stated the correct email address** |
| **Primary Referee** |
| Name  |  |
| Post/Role  |  |
| Relationship to applicant |  |
| Organisation |  |
| Address |  |
| Email Address |  |
| Telephone Number |  |
| **Reserve Referee** |
| Name  |  |
| Post/Role |  |
| Relationship to applicant |  |
| Organisation |  |
| Address |  |
| Email Address |  |
| Telephone Number |  |

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| **Recruitment Monitoring** |

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| Have you had any criminal conviction?Spent, Unspent or Pending  | Yes/No |
| Do you need a permit to work in the UK? | Yes/No |
| **Disability** We are committed to supporting all potential volunteers who have a disability. |
| Do you have a Disability? |  |
| Do you need any adaptations to attend for interviews or to carry out the work described in the Volunteer Role Description? |  |
| **Declaration of Interest**  |
| Are you related to an employee of Solace Women’s Aid? |  |
| Are you a current volunteer with Solace Women’s Aid? |  |
| Where did you hear about this position |  |

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| I certify that, to the best of my belief, the information I have provided is true and I understand that any false information or failure to disclose criminal convictions will result, in the event of employment, in disciplinary investigation and is likely to result in dismissal. | Signed: |
| Date: |
| I hereby give consent for personal information (including recruitment monitoring data) provided as part of the application to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the Data Protection Act.  | Signed: |
| Date: |