



VOLUNTEER
Application Form
IN CONFIDENCE

Please complete this application form with your line manager at interview. Please ensure that you complete all sections fully and to the best of your ability.

1. Role Details

Volunteering role applied for		Service area	
Location		Line Manager	
How did you hear about this role?			

2. Personal Details

Title		First name		Surname	
List any previous names				Known as	
Address			Phone number		
			Mobile number		
Postcode			Email address		
Do you have a disability which may affect your application?	Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, please provide details		
How many hours a week are you looking to volunteer?			If successful how soon would you be able to join us?		

When would you be available?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

YMCA enables people to develop their full potential in mind, body and spirit. Inspired by, and faithful to, our Christian values, we create supportive, inclusive and energising communities, where young people can truly belong, contribute and thrive.

SUPPORT & ADVICE

ACCOMMODATION

FAMILY WORK

HEALTH & WELLBEING

TRAINING & EDUCATION



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Have you been involved with YMCA before?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please give details	
Do you know or are you related to anyone who works for YMCA?		If yes, please give details	

3. Supporting Statement

Please provide information as to why you would like to volunteer at YMCA and what you can bring to the volunteering role. Please also tell us a bit about your interests and hobbies.

4. Qualifications & Training

Please list any qualifications or training relevant to the volunteer role.

Qualifications & Training					
Date		Subjects studied		Qualification obtained (including grades)	





5. References

Please give the details of two referees, one of whom should be your current or most recent employer, social worker, housing officer, college tutor or teacher. **We will accept volunteer or personal references for volunteer roles.**

Referee 1		Referee 2	
Full name		Full name	
Job title		Job title	
How does this person know you?		How does this person know you?	
Address		Address	
Postcode		Postcode	
Contact details	Phone: Email:	Contact details	Phone: Email:
Please sign in consent that we may contact your references	Name: _____ Signature: _____ Date: _____		

6. Declaration of Criminal Convictions

One YMCA is committed to safeguarding the children, young people and adults at risk who access its services. All volunteers are required to declare any unspent criminal convictions or pending court cases, other than for motoring offences. The Rehabilitation of Offenders Act 1974 sets out to help people who have been convicted of a criminal offence and have not been convicted again within a specified period. Once a conviction is spent, the convicted person does not have to reveal it or admit its existence, however if the volunteer role for which you are applying is subject to a Disclosure and Barring (DBS) check this will clearly be stated on the advert and/or on the role description and you are also required to declare all information in relation to spent convictions, cautions and warnings. Declaration of a criminal conviction will not necessarily bar you from volunteering. Each case will be considered and where necessary, advice taken.

Have you any unspent criminal convictions and/or pending cases?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please give details including date, offence and (where appropriate) sentence	
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Have you any spent criminal convictions or any cautions, warning or reprimands?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please give details including date, offence and (where appropriate) sentence	
Have you at any time been fully or partially debarred or restricted from working with children, young people and/or adults at risk?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Do you have a current DBS that is registered to the update service? (If yes you will be required to provide us with this information at a later date).	Yes <input type="checkbox"/> No <input type="checkbox"/>		

7. Declaration

By signing and returning this application form, I consent to One YMCA keeping, using and relating to my application in line with the requirements of the Data Protection Act 2018. I understand that if I am successful, this application form will become part of my volunteer file and if I am not successful, in accordance with the Data Protection Act, all manual and electronic records will be deleted after a period of six months from all relevant filing systems.

I declare that the information I have given on this form is true and complete. I understand that any fabrication may lead to withdrawal of an offer to volunteer for YMCA or subsequent withdrawal of the volunteering arrangement by YMCA.

Signature		Date	
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Diversity & Equality Monitoring

You are invited to complete the following Diversity & Equality form, although it is not a formal requirement of the application process.

The following information is collected to ensure our policies and practices remain free from discrimination. This information will remain confidential and will not be shared outside of the HR department.

How would you describe yourself?	
Asian background	Asian or Asian British <input type="checkbox"/>
	Bangladeshi <input type="checkbox"/>
	Indian <input type="checkbox"/>
	Pakistani <input type="checkbox"/>
	Other (please state) <input type="checkbox"/>
Black background	Black or Black British <input type="checkbox"/>
	African <input type="checkbox"/>
	Caribbean <input type="checkbox"/>
	Other (please state) <input type="checkbox"/>
East and Southeast Asian background	Chinese <input type="checkbox"/>
	Japanese <input type="checkbox"/>
	Southeast Asian <input type="checkbox"/>
	Other (please state) <input type="checkbox"/>
Mixed background	White and Asian <input type="checkbox"/>
	White and Black African <input type="checkbox"/>
	White and Black Caribbean <input type="checkbox"/>
	Other (please state) <input type="checkbox"/>
White background	White British <input type="checkbox"/>
	White Irish <input type="checkbox"/>
	Other (please state) <input type="checkbox"/>
Other (please state)	
Prefer not to say	<input type="checkbox"/>





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What age range are you in?	Under 21	<input type="checkbox"/>
	21 - 30	<input type="checkbox"/>
	31 - 45	<input type="checkbox"/>
	46 - 60	<input type="checkbox"/>
	Over 60	<input type="checkbox"/>
How would you describe your sexual orientation?	Heterosexual	<input type="checkbox"/>
	Gay	<input type="checkbox"/>
	Lesbian	<input type="checkbox"/>
	Bisexual	<input type="checkbox"/>
	Other (please state)	<input type="checkbox"/>
Religion and Faith <i>While YMCA is inspired by and faithful to its Christian heritage, we welcome applications from people of all faiths and none.</i>	Buddhist	<input type="checkbox"/>
	Christian	<input type="checkbox"/>
	Hindu	<input type="checkbox"/>
	Jewish	<input type="checkbox"/>
	Muslim	<input type="checkbox"/>
	Sikh	<input type="checkbox"/>
	No religion	<input type="checkbox"/>
	Prefer not to say	<input type="checkbox"/>
	Other (please state)	<input type="checkbox"/>

