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**VOLUNTEER APPLICATION FORM**

|  |  |
| --- | --- |
| Surname |  |
| Other names |  |
| AddressPostcode |  |
| E-mail address |  |
| Telephone numbers:HomeMobile |  |
| Date of Birth.(Minimum age requirement 18+) |  |
| Do you have any specific needs e.g. accessibility |  |
| Why are you interested in volunteering?**(please highlight as appropriate)** | **Please tick all that apply:**🞏 I want to help others 🞏 I have spare time and want to use it productively🞏 I am interested in voluntary work 🞏 I have personal experience of abuse🞏 I have known people who have been abused🞏 I have skills I can bring to the organisation 🞏 Any other reasons  |
| What skills,qualities and/or experience could you bring?  |  |
| How did you hear about volunteering with Hourglass? **(please highlight as appropriate)** | 🞏 Volunteer Centre 🞏 Advert 🞏 Job Centre 🞏 Posters/leaflets 🞏 Internet (Hourglass Website)🞏 Other (Please specify) |
| Do you have any criminal convictions /cautions (with the exception of fixed penalty traffic offences?)**(please highlight as appropriate)** | **Hourglass requires some volunteers to undertake a basic/standard/enhanced DBS/PVG /Access NI check. You are required, before appointment, to disclose any unspent conviction, caution, reprimand or warning under the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975/Scotland Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2003 (as amended) The Rehabilitation of Offenders (Exceptions) Order (NI) 1979 (amended by 1987, 2001, 2003, 2009, 2012 and 2014 Orders Non-disclosure may lead to termination of your role. However, disclosure of a criminal background will not necessarily debar you from volunteering – this will depend upon the nature of the offence(s) and when they occurred.**Yes. (Please provide details)No. |
| What voluntary role/s are you interested in? | 🞏 Community Response/Safer Ageing Volunteer 🞏 Helpline Volunteer 🞏 Research Volunteer🞏 Administrative Support Volunteer🞏 Occasional/one-off volunteering e.g. Fundraising, Publicity and Promotion, Events.  |
| When are you able to volunteer? |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Mon** | **Tues** | **Weds** | **Thurs** | **Fri** | **Sat** | **Sun** |
| **Morning** |  |  |  |  |  |  |  |
| **Afternoon** |  |  |  |  |  |  |  |
| **Evening** |  |  |  |  |  |  |  |

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| Please provide the names and contact details of two people who have known you for at least two years (not partner, spouse or relatives) and are willing to act as referees. If possible, one should be from an organisation or group for whom you have volunteered or worked as an employee.  | 1st RefereeName:Address/Email Address:Tel Number:How long has this person known you and in what capacity?2nd RefereeName:Address/Email Address:Tel Number:How long has this person known you and in what capacity? |

I declare that the details given by me on this application form are correct to the best of my knowledge and belief. I understand that if I give any information which is false, or I withhold any relevant information, this may lead to my application being rejected. I understand that information given on this form will be processed by a computer and used for registration and equal opportunities monitoring purposes under the Data Protection Acts 1984 and 1998.

Signature (to be typed in if sending electronically)

Print Name:

Date:

Please forward your completed application to volunteers@wearehourglass.org

If returning via post please send it to Volunteer Coordinator, Hourglass, Office 8,

Unit 5, Stour Valley Business Centre, Brundon Lane, Sudbury, Suffolk, CO10 7GB.

**Hourglass is the working name of Hourglass (Safer Ageing), a charity registered in England and Wales (reg. no: 1140543), and also in Scotland (reg. no: SC046278). Hourglass (Safer Ageing) is registered as a company in England and Wales under number 07290092.**

 **Monitoring Form**

**Equality Monitoring Form**

**Date: …………………………………**

Please answer the questions below by ticking/circling or highlighting the boxes that you feel

most describes you. Some questions may feel personal, but the information we collect will be kept confidential and secure.

|  |
| --- |
| Date of birth |
|  / /  | Prefer not to disclose |

|  |
| --- |
| Sex |
| Male | Female | Transgender | Other | Prefer not to say | Prefer to self-describe |

|  |
| --- |
| Sexual Orientation |
| Heterosexual | Gay man | Gay woman/lesbian | Bisexual | Other | Prefer not to say | Prefer to self-describe |

|  |
| --- |
| **Language** |
| **Please state your first language:** |  |
| **Are you able to speak any other languages? If yes, what language(s)?** |  |

|  |
| --- |
| **Ethnic Origin**  |

| White British |  |  | Asian: Indian |  |
| --- | --- | --- | --- | --- |
| White Irish  |  |  | Asian: Pakistani |  |
| White Scottish |  |  | Asian: Bangladeshi |  |
| White Welsh |  |  | Other Asian background |  |
| White Other |  |  | Black: Caribbean |  |
| Mixed: White and Black Caribbean |  |  | Black: African |  |
| Mixed: White and Black African |  |  | Other Black background |  |
| Mixed: White and Asian |  |  | Other |  |
| Mixed: Other |  |  | Chinese |  |
| Prefer Not To Say |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Disability** | **Yes** | **No** | **Prefer Not To Say** |
| **Do you consider yourself to have a long-term illness or disability?** |  |  |  |
| **Do you use a wheelchair?** |  |  |  |
| **If you do have a disability, please state the nature. This information will ensure that we are better able to support you in your role with us here at Hourglass** |  |  |  |

|  |
| --- |
| **Religion**  |

|  Christian |  |  |  Buddhist |  |
| --- | --- | --- | --- | --- |
|  Muslim |  |  |  Jewish |  |
|  Sikh |  |   |  Other |  |
|  Hindu |  |  |  No Religion |  |
| Prefer Not To Say |  |  |  |  |

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