**[NAME OF SYNAGOGUE]  
APPLICATION FORM FOR NEW VOLUNTEERS**

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| **TITLE:** | **SURNAME** |
| **FIRST NAMES:** |  |
| **ADDRESS** |  |
| **HOME TEL NO:** |  |
| **MOBILE NO:** | **WORK NO:** |
| **EMAIL:** |  |
| **DATE OF BIRTH:** |  |
| **CONTACT TEL NO (IN EMERGENCY)** |  |
| **NAME OF EMERGENCY CONTACT** |  |

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| **HAVE YOU WORKED AS A VOLUNTEER BEFORE?** | **YES/NO** |
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| **IF YES, PLEASE GIVE DETAILS:** |  |
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| **WHAT ARE YOUR REASONS FOR WANTING TO VOLUNTEER WITH [INSERT NAME OF**  **COMMUNITY]?** |  |

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| **WHAT ARE YOUR MAIN HOBBIES AND INTERESTS?** |
| **PLEASE STATE ANY SKILLS OR QUALIFICATIONS YOU POSSESS THAT YOU THINK MAY BE USEFUL AS A VOLUNTEER FOR [INSERT NAME OF COMMUNITY]:** |
| **PLEASE STATE ANY ILLNESS/DISABILITY OR OTHER REASON THAT MIGHT BE RELEVANT TO YOUR WORK AS A VOLUNTEER:** |

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| **THERE ARE MANY DIFFERENT AREAS OF WORK THAT VOLUNTEERS CAN TAKE ON.  PLEASE TICK ANY OF THE FOLLOWING THAT YOU WOULD BE INTERESTED IN:** | |
| WORKING WITH OLDER PEOPLE: | BEREAVEMENT: |
| WORKING WITH YOUNGER PEOPLE: | EMPLOYMENT ADVICE: |
| WORKING WITH CHILDREN: | BEFRIENDING: |
| DRIVING: | FORM FILLING: |
| SHOPPING: | NO PREFERENCE: |
| OTHER:  **AVAILABILITY** |  |
| **At what times are you interested in volunteering?** |  |
| **Flexible:** | **Weekend:** |
| **Weekdays:** | **Please state preferred days:** |
| **Daytime:** | **Please state preferred hours:** |
| **Evening:** |  |
| **Times in the week when I cannot do volunteer work:** |  |
| **Would you be happy to visit a home that has a dog/cat?** | **YES/NO** |
| **Do you drive?** | **YES/NO** |
| **Do you have access to a car?** | **YES/NO** |
| **Would you be willing to travel out of your own area?** | **YES/NO** |
| **Please state areas you would be willing to travel to:** |  |

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| **REFERENCES:** | |
| **Please provide the name, address and telephone number of two referees. One of these must be a previous employer, current employer, Rabbi, teacher, doctor or other professional person or a voluntary organisation for whom you have volunteered. Please do not use family members.** | |
| **(1)** | **Name** |
|  | **Address** |
|  | **Tel no** |
| **(2)** | **Name** |
|  | **Address** |
|  | **Tel no** |

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| **SIGNATURE OF VOLUNTEER:** | **DATE:** |