# **Volunteer Questionnaire**

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| **HELP IN THURSLEY** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Surname |  | | First Name | |  | | Mr/Mrs/Miss/Ms |
|  |  | |  | |  | |  |
| Home Address |  | | | | | | |
|  |  |  | |  | |  | |
| Postcode |  | Email: | |  | | | |
|  |  |  | |  | |  | |

Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| What age are you? (tick one) | Under 30 |  | 31-40 |  | 41-60 |  | Over 60 |  |

What days/times are you likely to be available? (Tick all that apply, **?** =May be available)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| Morning |  |  |  |  |  |  |  |
| Afternoon |  |  |  |  |  |  |  |
| Evening |  |  |  |  |  |  |  |
| Try any time | |  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you willing to be a Driver? | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you willing to be a Duty Officer? | Yes |  | No |  |

|  |  |
| --- | --- |
| How frequently do you want to help? |  |

What type of Vehicle do you have? (tick as appropriate)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 4/5 Door |  | 2/3 Door |  | Saloon |  | Estate |  |
|  |  |  |  |  |  |  |  |
| Hatch Back |  | People Carrier |  | Takes fold-up Rollator or walking aid | | |  |
|  |  |  |  |  |  |  |  |

What tasks can you help with? (tick all that apply)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Driving client to/from |  | Driving client to/from |  | Driving client to/from |  |
| Doctors, Dentist etc |  | Library |  | shops |  |
|  |  |  |  |  |  |
| Shopping for client’s |  | Acting as transport escort |  | Driving client & pet |  |
| household |  | (2nd person going with driver who cannot stay with client |  | to/from Vet |  |
|  |  |  |  |  |  |
| Dog walking |  | Carrying out occasional |  | Taking people to the |  |
|  |  | chores |  | hairdressers |  |

|  |  |
| --- | --- |
| Are you willing to drive clients to/from hospitals? |  |

Please detail below any special skills or experience you may have that could be relevant to your role as a Volunteer with Help in Thursley

Please give the names & addresses of **TWO** referees we can contact about your suitability as a Volunteer with Help in Thursley. Ideally they should have known you for at least two years, and should not be related to you.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name |  |  | Name |  |
|  |  |  |  |  |
| Address |  |  | Address |  |
| Landline and Mobile Phone Numbers |  |  | Landline and Mobile phone numbers |  |

**Rehabilitation of Offenders Act 14 (Exemption) Orders 1975 & 1986.**

The provisions relating to the non-disclosure of criminal convictions do not apply to the voluntary work for which you are applying. Therefore, it is necessary for you to disclose any criminal conviction even if under the Rehabilitation of Offenders Act they would otherwise be regarded as ‘spent’. Disclosing an offence will not necessarily prevent you from volunteering.

### Please delete or complete as appropriate

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Have you been convicted of any criminal offence at any time? |  | Yes |  | No |  |
|  |  |  |  |  |  |
| Do you have any charges pending? |  | Yes |  | No |  |
|  |  |  |  |  |  |
| If Yes, please give details of the conviction(s), charge(s), and date(s) | | | | | |
|  | | | | | |

#### PLEASE READ & SIGN THE FOLLOWING DECLARATION

If I am accepted as a Volunteer with Help in Thursley, I undertake to:

* Maintain confidentiality at all times between me, the client & Volunteers & the Committee Members.
* Pass on to the Treasurer all donations I receive
* Notify the Volunteer Co-ordinator of any change in my circumstances that may affect my work as a Volunteer with Help in Thursley

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signature |  | Print Name |  | Date |  |

#### VEHICLE DRIVERS ONLY

If I am accepted as a volunteer with Help in Thursley, I confirm that I

* Have a valid Driving Licence (this should be checked with DVLA and a copy kept on file)
* Hold current insurance cover for the vehicle that I shall be driving
* Agree to maintain my vehicle in a roadworthy condition
* Will notify my present and any subsequent Insurance Company using the form provided by Help in Thursley that I intend to use my vehicle for voluntary work or know that the Insurance Company is on and has been checked with the ABI check list.
* notify the Committee immediately of any change relating to the above, (for example, a disqualification or medical condition) that may affect my ability to drive

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Volunteers  Signature |  | Print Name |  | Date |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Interviewers  Signature |  | Print Name |  | Date |  |

To support this application please tick the relevant boxes for documents enclosed.

|  |  |
| --- | --- |
| *Application Form* | *2 photographs*  *(passport or similar size for ID cards)* |
| *Driving Licence checked with DVLA* | *Confirm Form for Insurance Company left with Volunteer if not on the ABI list* |

Please provide your personal bank details for the repayment of expenses claimed

|  |
| --- |
| **ADDITIONAL INFORMATION**  Whilst meeting with the volunteer useful information may be given by the volunteer and if appropriate should be recorded here. It may include matters such as the volunteer is not comfortable with visiting homes with particular pets. The volunteer may have special skills/interests they do not think important but may be useful to the scheme. They may have ideas as to how we can improve services to the community |