|  |  |
| --- | --- |
| Name: |  |
| Date of Birth: |  |
| Address: |  |
| Postcode: |  |
| Tel No: |  |
| Email Address: |  |
| Emergency Contact Name: |  |
| Relationship: |  |
| Emergency Contact Number: |  |
| Please state any health issues we need to be aware of: |  |
| How did you hear about us? |  |

Times available to volunteer (Please tick when available)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | MON | TUES | WED | THURS | FRI | SAT | SUN |
| AM |  |  |  |  |  |  |  |
| PM |  |  |  |  |  |  |  |
| EVE |  |  |  |  |  |  |  |

Type of voluntary work preferred: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred location of voluntary work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you drive/have access to a vehicle? Yes [ ]  No [ ]

Qualifications/Skills:

Relevant work or voluntary experience:

Is there anything else you would like to tell us?

Are you working towards any youth work qualification? If yes, what qualification and where are you studying?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| To ensure the continued safeguarding of children and vulnerable adults the Vale of Glamorgan Council undertakes vetting procedures for volunteers in the same manner as employees. *We require details of two referees and only when we have received satisfactory references you will be able to volunteer. One must be a professional person, (preferably your current or last employer or tutor), who has known you for at least one year and is not a close friend or family member. The other must be someone who knows you well in either a professional or personal capacity.* |
| Referee 1 – Professional referenceName:Address:Postcode:Email address: Telephone:How do they know you (relationship to you)?How long have they known you? | Referee 2 – Personal referenceName:Address:Postcode:Email address: Telephone:How do they know you (relationship to you)?How long have they known you? |

**REFERENCES**

**DISCLOSURE OF CRIMINAL CONVICTIONS**

As this role involves access to vulnerable adults/children, it is exempted from the Rehabilitation of Offenders Act 1974. Those offered a position will be required to undertake an Enhanced Disclosure from the Disclosure and Barring Service before the position is confirmed. The presence of a criminal record does not necessarily prevent volunteering with the Vale Youth Service.

Please tick.

I have nothing to declare [ ]

I have information to declare [ ]

(Give details of the offence on a separate sheet marked ‘Confidential’)

**DECLARATION**

I declare that the information I have given is accurate and true and that any false or misleading information given on this form may lead to the offer of a placement being withdrawn. I authorise the Vale Youth Service to make any appropriate checks necessary in relation to the post I am volunteering for and to retain a copy of the DBS form. I will inform the Vale Youth Service if any of my contact information changes whilst volunteering for the organisation.

The Youth Service abides with all requirements of GDPR Legislation. Personal data obtained from this application and the data provided on this form will be held and processed by the Vale Youth Service on Council on computers/servers or in manual records. It may be used by The Vale of Glamorgan Council for any purpose relating to this application. Your information will not be given to external organisations unless consent is given. Further information on how the Vale of Glamorgan Council holds, shares and uses information is available via the following link - <https://www.valeofglamorgan.gov.uk/en/our_council/Website-Privacy-Notice.aspx>

I give permission for the storage and processing of personal information by The Vale of Glamorgan Council.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If you are completing this form electronically, please type your name to indicate signature.)

**Please send this completed application form to** **valeyouthservice@valeofglamorgan.gov.uk****.**

**For office use only**:

|  |
| --- |
| Date application form received: |
| Date of initial meeting / interview: |
| Has a suitable placement been agreed? If ‘NO’ please give reasons why: |
| Dates references received: |
| DBS certificate number: |
| Date volunteer placed: |
| Location (s) of volunteer placement: |
| Name of volunteer supervisor: |
| Date induction completed: |
| Date volunteer placement ended: |
| Date of Volunteer Placement Review offered / completed: |
| Name of Senior/Manager who completed process: |