

**Brent Irish Advisory Service Volunteer Application Form**

Thank you for your interest in volunteering with Brent Irish Advisory Service. Information about where to send your completed form is at the end of this document. If you have any queries regarding your application please do not hesitate to contact us.

|  |  |
| --- | --- |
| **Name** |  |
| **Address**  **Postcode** |  |
| **Email Address** |  |
| **Phone:** |  |

|  |  |
| --- | --- |
| **DOB:** |  |

|  |  |  |
| --- | --- | --- |
| **Gender** | **Male ❑** | **Female ❑** |

**Are you available to volunteer weekdays?**

**Are you interested in any particular volunteer role or BIAS project? If so, please indicate which role you are interested in (If you are unsure please skip this question)**

**Why are you interested in volunteering with the BIAS?**

**Do you have any particular skills that you can bring to BIAS?**

**Are you interested in volunteering to build your own skills and experience?**

**Have you had any previous experience of volunteering? If yes, please give details.**

**Please tell us a bit about your previous work/education.**

**Do you have any health issues which may affect your volunteer role? If so how can we support you with this?**

**Volunteering with BIAS often involves engagement with vulnerable older people. It is our responsibility to safeguard the welfare of both client and volunteer. This means applicants must declare any previous convictions.**

**The disclosure of criminal convictions will not necessarily prevent you from becoming a volunteer.**

**Have you ever had a criminal conviction or have any offences pending?**

**Yes ❑**

**No ❑**

**If yes**

**When did this take place? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What was the charge? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_**

**In order that we may offer you appropriate support in your volunteer role. Please advise us of any health or medical conditions that you think may affect the type of volunteer duties that you can do, or how we may support you?**

**Please note that some of our volunteer roles require you to be subject to a Criminal Records Bureau Enhanced Disclosure. Please note that declaring a conviction will not automatically stop you from volunteering with BIAS.**

**REHABILITATION OF OFFENDERS ACT 1974**

**As volunteers are often placed with vulnerable older people, we have a responsibility to safeguard the interest of both client and volunteer.**

**This means applicants are not entitled to withhold information about convictions which for other purposes are considered ‘spent’.**

**Please note that the disclosure of criminal convictions will not necessarily prevent you from becoming a volunteer.**

**Have you ever had a criminal conviction or have any offences pending?**

**Yes ❑ No ❑**

**If yes**

**When did this take place? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What was the charge? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_**

***Data protection Act 1998***

*The information you provide us with is confidential and we do not pass on any personal details about you to other organisations and/or individuals without your consent.*

|  |  |
| --- | --- |
| **Emergency Contact** | |
| **Name:** |  |
| **Address:** |  |
| **Contact number:** |  |

**You can email your application to:** [**info@biasbrent.co.uk**](mailto:info@biasbrent.co.uk)

**Or you can post/drop into our office:**

**379-381 High Road,**

**Willesden,**

**London,**

**NW10 2JR**

**Tel: 02084596655**