## Mid-Lin Day Care Volunteer Application Form

Full Name:		Date of Birth:		
Full Address:		P.V.G Number:		
		I.L.A. Number:		
Former Address *		Maiden Name or Other Name Know by:		
Referred by:		Occupation:		
Telephone:		Emergency Contact Details Including Telephone Number.		
Mobile:				
Email:				
Passport Number:		Driving Licence Number:		
Nationality:	Town of Birth:	Female( )N.I. NumberMale( )		

\* Former address to be completed if present address is less than 5 years

Volunteer Opportunities - please number in order of preference area(s) of interest:

Driving Service Users	Administration	
Escorting Service Users	Kitchen Assistance	
Care work / Befriending	Domestic / Cleaning	
Activities Co- ordinator	Garden /Property Maintenance	

• Your Experience / Interests & Hobbies: Please continue on separate piece of paper if necessary

• Please tell us where you heard about Mid-Lin and why you would like to become a Mid-Lin Day Care Volunteer: Please continue on separate piece of paper if necessary.

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					

• Please indicate which days and times you are available for Volunteering at Mid-Lin:

• Please provide us with the names and address details of two Referees who have known you for at least two years and are not related to you

Name (1)	
Address	
Telephone	
Email	

Name (2)	
Address	
Telephone	
Email	

Certain Volunteering Roles involving working with Vulnerable Adults will require a Disclosure. This will only be sought with your consent as the final stage of our recruitment process for successful applicants. The Code of Practice and further information is available from the Volunteer Development Worker

I declare that the information given on this application form is true and I wish to be considered for a Voluntary position with Mid-Lin Day Care. On signing this form I am aware and give permission that Mid – Lin Day Care will hold my personal information on file. I agree that I will adhere to the confidentiality of information gained while volunteering at Mid-Lin.

Signed......Date.....

Please return this form to: Alison Sellars Volunteer Development Worker Mid-Lin Day Care, 59 Pitkerro Drive, Dundee DD4 8AT Tel: 01382 506451 E-Mail: <u>volunteermidlin@yahoo.co.uk</u>