

Volunteer application form for RCLC

Please return to:

Reading Community Learning Centre
94 London Street
Reading
RG1 4SJ



The Workers' Educational Association (WEA) registered charity number: 1112775. Company Ltd by guarantee in England & Wales no: 2806910
RCLC registered charity number: 1123017. Company Ltd by guarantee in England & Wales no: 6442626

Title:	First name(s):	Last name:
Address:		Emergency Contact:
Town:		
County:		
Postcode:		
Telephone (daytime):		
Telephone (evening):		
Mobile:		
Email address:		

Particular Skills you could offer the RCLC: (e.g. qualifications, voluntary experience, professional skills, work experience)

Office or IT skills:

What kind of work would you like to be involved in? (classroom assistant, crèche assistant, office work, receptionist & telephone skills, fundraising, governance, finance, event planning, marketing ...)

References Please provide in full, the name, address and telephone number of two referees.

Title & Name	Title & Name
Position	Position
Address	Address
Tel	Tel
Email	Email

DATA PROTECTION

Details you have provided will be entered onto our database, which is registered under the Data Protection Act.

CRIMINAL RECORDS BUREAU (CRB) DISCLOSURE

As a volunteer for the WEA you may be required to complete a CRB Disclosure Statement. This may be a condition of your appointment in some circumstances.

SIGNATURE

By signing this application form below you are confirming that all details contained within the application are correct and agreeing that, if you are invited to interview, you will bring the required documents with you.

Signed: _____

Date: _____

For Regional Office use only		
Date form received	Interview date	Interview letter sent
Identity Documents verified	By whom	Interview form received
References applied for	References received	CRB: Disclosure required
CRB: Check received	Entered on WEAMIS	Staff ID on WEAMIS

Equal Opportunities Monitoring:

The following information is requested to enable us to action Equality & Diversity measures. This form will be separated from your application on receipt.

Date of birth				
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Gender		MALE			FEMALE	
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Ethnicity	
<input type="checkbox"/> Asian or Asian British – Bangladeshi	<input type="checkbox"/> Mixed – White and Asian
<input type="checkbox"/> Asian or Asian British – Indian	<input type="checkbox"/> Mixed – White and Black African
<input type="checkbox"/> Asian or Asian British – Pakistani	<input type="checkbox"/> Mixed – White and Black Caribbean
<input type="checkbox"/> Asian or Asian British – any other Asian Background	<input type="checkbox"/> Mixed – any other mixed background
<input type="checkbox"/> Black or Black British – African	<input type="checkbox"/> White – British
<input type="checkbox"/> Black or Black British – Caribbean	<input type="checkbox"/> White – Irish
<input type="checkbox"/> Black or Black British – any other Black background	<input type="checkbox"/> White – any other White background
<input type="checkbox"/> Chinese	<input type="checkbox"/> Any other

Do you consider yourself to have any learning difficulties/disabilities? Yes No

Do you consider yourself to have any physical difficulties/disabilities? Yes No

Please tell us if there are any special requirements we should know about and, if necessary, make reasonable adjustments for

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