



Confidential

YATELEY NEIGHBOUR CARE VOLUNTEER RECRUITMENT FORM

Full Name:	DOB:
Address:	Tel. No: Mobile: email:
<ul style="list-style-type: none"> • Present Occupation: • Driver/ Duty Officer/ Both • Do you have any disability or health problems that may affect voluntary driving e.g. severe back problems?: <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please advise: 	

Times you are available:

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
AM							
PM							
Evening							

Times you are unavailable: e.g. school holidays	
Driving commitment: 'short journeys'/'hospital journeys'/'long journeys' (Delete as appropriate)	
Are you able to offer 'regular trips' e.g. weekly shopping/:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Are you able to take wheelchairs in your car?:	<input type="checkbox"/> YES <input type="checkbox"/> NO

Which of the following are you able to assist with?:		*Delete as appropriate	
Committee Member*	Duty Officer*	Driver*	Shopping*

Do you have any voluntary experience or other relevant experience?:

Do you hold a full driving licence?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	DRIVERS ONLY If no please give details: _____	
Do you have comprehensive insurance?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		
Do you have a clean driving licence?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		
Car Details: Delete as appropriate*				
Make of car:	Saloon*	Estate*	Hatchback*	People Carrier*
Model:				

Confidential

Rehabilitation of Offenders Act 1974 (Exemption) Orders 1975 & 1986

The provision relating to the non-disclosure of criminal convictions does not apply to the voluntary work for which you are applying. Therefore, it is necessary for you to disclose any criminal convictions 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.

Have you ever been convicted of any Criminal Offence:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If YES please give details of conviction(s) and date(s)		

I wish to become a volunteer member of Yateley Neighbour Care. The information I have given is correct at the date of this application. I also agree that Yateley Neighbour Care can retain relevant information on me (in compliance with the General Data Protection Regulations). I also agree that Disclosure and Barring Service (DBS) checks, and Police checks if appropriate, can be made.	
Signature:	Date:
Interviewee Signature:	Date:
COMMENTS:	

Yateley Neighbour Care Information Only		
Interview Date:	Heard about us via:	Volunteer No.

For further information on becoming a volunteer please contact:

Andrea Inglis	tel 07508693396	email home@inglis76.co.uk
----------------------	------------------------	---