



# Volunteer Centre

Wyro Forest

## Volunteer Registration

Thank you for deciding to register as a volunteer. So that we can offer you support and advice please take a few minutes to complete this registration document. You can choose not to answer any question. If you are unsure about any part of this document please ask for advice or assistance.

### **Data Protection:**

1. At no time will we provide any of your details to a third party without your permission.
2. You have the right to see any information about you that we hold in a retrieval system such as a computer database or paper index system.
3. You have the right to challenge us about any information relating to you we hold in a retrieval system and have this changed.
4. You have the right for your details to be removed from a retrieval system.
5. We may compile statistical data from time to time but this will never include references to a particular individual.
6. In order to keep you up to date with information and events we may include you in our mailing list or email list.
7. We will never sell or give our mailing lists to a third party.

### **What will we do with the information you give us?**

We will hold your information confidentially. Using the information we will try to match you with volunteering opportunities that appear to suit your preferences and availability. If we find a match we will contact you with the details of the volunteering opportunity; you can then decide if this is something you would like to become involved with as a volunteer or not. If not, we will continue to look for volunteering opportunities that you may be interested in. We will not send your name and contact details to an organisation seeking volunteers unless you have agreed with us that we may do so. We will never send anyone your personal details.

### **Criminal Record Certificates**

Some opportunities require that a criminal record check be carried on anyone who wishes to volunteer with them. This is often the case if the volunteering involves working with children or vulnerable persons. No criminal record checks will be made without your consent and you have been accepted as a volunteer for an organisation requiring such a check to be made.

## Your Details & Preferences

PLEASE WRITE IN BLACK INK AND USE CAPITAL LETTERS

Mr. Mrs. Miss Ms. (circle one)

First name.....

Surname.....

Salutation (Vicky, Mrs Smith etc).....

Address.....

Address.....

Address (Town).....

Address (County).....

Postcode.....

Do you agree to be contacted by the Volunteer Development Agency?

.....

Geographical area: (Office use only).....

Daytime telephone.....

Evening telephone.....

Mobile

Fax.....

Email.....

How did you hear about this Volunteer Development Agency?

.....

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.....

Please take a few minutes to look through the following lists. The Areas of Interest and the Activities that you choose help us to match you with volunteering opportunities.

<b>Areas of Interest</b> Please tick a maximum of 4 boxes:	<b>Type of Activity</b> Please tick a maximum of 4 boxes of the following that apply to the opportunity:	
Animals	Administration	
Art and Culture	Advice, Information and Support	
Children	Architecture and Building Work	
Disability	Art	
Disaster Relief	Befriending and Buddying	
Domestic Violence	Business, Management and Research	
Drugs and Addictions	Campaigning and Lobbying	
Education and Literacy	Caring	
Elderly	Catering	
Emergency Services	Community Work	
Employment	Computers, Technology and Website Design	
Environment	Counselling	
Families	Driving	
Gay, Lesbian, Bi and Transsexual	Employee and Group Volunteering	
Health and Hospital and Hospices	Entertainment	
Heritage	Finance Work	
Homeless and Housing	First Aid	
Human and Civil Rights	Fundraising	
International Aid	Gardening	
Legal Aid and Justice	General and Helping	
Mental Health	Hostel Work	
Mentoring	Languages	
Millennium Volunteers	Legal Work	
Museums	Local Events	
Music	Marketing, PR and Media	
Politics	Mentoring	
Prisoners and Ex-Offenders	Music	
Race and Ethnicity and Refugees	National and International Events	
Religion	Officials	
Sport and Outdoor Activities	Practical Work and DIY	
Women's Groups	Retail and Charity Shops	
Youth	Sports Development	
	Teaching, Training and Coaching	
	Trusteeship and Committee Work	
	Under 16 Volunteering	
	Youth Work	

**Please give brief details of any previous voluntary work experience.**

**Please tick each box when you could be available as a volunteer.**

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
AM							
PM							
EVE							

**Office Use Only**

Available	
Not available	
Placed	
Registered an interest	
Special skills	

**Date of birth**.....

**Gender:** Male Female (circle one)

**Which age group are you in? (tick one)**

<b>Under 15</b>	<input type="checkbox"/>
<b>15-18</b>	<input type="checkbox"/>
<b>19-25</b>	<input type="checkbox"/>
<b>26-29</b>	<input type="checkbox"/>
<b>30-34</b>	<input type="checkbox"/>
<b>35-39</b>	<input type="checkbox"/>
<b>40-44</b>	<input type="checkbox"/>
<b>45-49</b>	<input type="checkbox"/>
<b>50-54</b>	<input type="checkbox"/>
<b>55-59</b>	<input type="checkbox"/>
<b>60-64</b>	<input type="checkbox"/>
<b>Over 65</b>	<input type="checkbox"/>

**What is your current employment status? (tick one)**

<b>Employed</b>	<input type="checkbox"/>
<b>Houseperson</b>	<input type="checkbox"/>
<b>Non employed</b>	<input type="checkbox"/>
<b>Retired</b>	<input type="checkbox"/>
<b>Student</b>	<input type="checkbox"/>
<b>Unable to Work</b>	<input type="checkbox"/>
<b>Unemployed</b>	<input type="checkbox"/>

**Which ethnic group do you feel you belong in? (tick one)**

<b>White British</b>	<input type="checkbox"/>
<b>White British (English)</b>	<input type="checkbox"/>
<b>White British (Scottish)</b>	<input type="checkbox"/>
<b>White British (Welsh)</b>	<input type="checkbox"/>
<b>White Irish</b>	<input type="checkbox"/>
<b>Other White background</b>	<input type="checkbox"/>
<b>White &amp; Black Caribbean</b>	<input type="checkbox"/>
<b>White &amp; Black African</b>	<input type="checkbox"/>
<b>White &amp; Asian</b>	<input type="checkbox"/>
<b>Other Mixed background</b>	<input type="checkbox"/>

<b>Indian</b>	<input type="checkbox"/>
<b>Pakistani</b>	<input type="checkbox"/>
<b>Bangladeshi</b>	<input type="checkbox"/>
<b>Other Asian background</b>	<input type="checkbox"/>
<b>Black Caribbean</b>	<input type="checkbox"/>
<b>Black African</b>	<input type="checkbox"/>
<b>Other Black background</b>	<input type="checkbox"/>
<b>Chinese</b>	<input type="checkbox"/>
<b>Any other background</b>	<input type="checkbox"/>

**Nationality.....**

Religion.....

Are you disabled?          No                  Self Classified

Driving. Only complete these questions if you drive. *(tick one)*

Insured for voluntary driving	<input type="checkbox"/>
Own transport available	<input type="checkbox"/>

If you can drive what license type do you hold? *(tick one)*

Car Automatic	<input type="checkbox"/>
Car Full	<input type="checkbox"/>
Car Provisional	<input type="checkbox"/>
HGV - Class 1	<input type="checkbox"/>
HGV - Class 2	<input type="checkbox"/>
HGV - Class 3	<input type="checkbox"/>
Motorcycle	<input type="checkbox"/>
PSV/Coach	<input type="checkbox"/>

**This section for Office Use only**

Specials that apply *(These lists can be changed to suit your organisational needs)*

Cares inc	<input type="checkbox"/>
Community service	<input type="checkbox"/>
Community transport	<input type="checkbox"/>
Ex Offenders	<input type="checkbox"/>
Help service	<input type="checkbox"/>
Special needs	<input type="checkbox"/>