 

Volunteer Worker Application Form

**PLEASE WRITE IN CAPITALS**

Full Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Landline Phone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth \_\_\_\_\_\_\_\_\_ Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Next of Kin (in case of emergency) contact details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ReadiFood Is open during the day Monday to Friday which days are you available? Mon  Tue  Wed  Thur  Fri 

Would you be interested in becoming an evening volunteer for **ReadiStreet** outreach to the homeless? Yes  No 

Would you be interested in becoming a daytime volunteer for **Reading Pantries** which are based across Reading? Yes No

Name of **church** or **fellowship** (if applicable) \* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_\_

How long have you been a Christian? \* (if applicable) \_\_\_\_\_\_ years

Have you been **vaccinated** against Hepatitis B? \* **Yes □ No □** (We highly recommend that you have a conversation with your G.P. Some will vaccinate for free, others charge. Emphasise the nature of this role and the contact that you will have with people likely to be infected.)

Are you **First Aid** trained? \***Yes □ No □** (If “Yes” please give brief details of training below) Date Certificate expires \_\_\_\_\_\_\_\_\_

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Do you hold a full, clean **driving license**? \* Yes  No  (If NO and appropriate please give details below)

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**References:**

We will require **two character references**, preferably from your church leader or homegroup leader\*, otherwise your employer and/or someone you have known for a long time.

\*If you are a Christian, do you have the full support of your Church? Yes  No  and are you able to get a couple of people to regularly pray for you while you are involved with this outreach.

**Name and address of referees**:

 **Referee 1 Referee 2**

|  |  |  |
| --- | --- | --- |
| Referee’s Name  |   |   |
| House No / Street  |   |   |
| Post Code  |   |   |
| Email  |   |   |
| Phone number (if possible)  |   |   |

**GDPR compliance**. We keep the paper copy of your application on file in a locked cabinet in the office. Lists of volunteers with contact details are kept “in the cloud” on Dropbox which is GDPR compliant. Office computers, network and Dropbox access are all password protected. We may **share** your phone number and email address with other volunteers on your team so that you can stay in touch with one another. If there is a specific reason why you do not wish to have your email address or phone number shared you must say so.

Are you happy to share your mobile number **Yes □ No □** Are you happy to share your email address **Yes □ No □**

**Photographs & Video**

From time to time we **photograph** and **video** for purposes of publicity via FaceBook, website, newsletters etc. You will be told if you are being filmed. Are you happy for images of you to be used in this manner? Yes  No  If you reply no here you will still need at the time to ask not to be filmed. This does not override your rights under GDPR to ask for any recording to be erased or not used.

**Declarations**:

I wish to apply to be a volunteer with FAITH Christian Group (Reading) Trust. I understand that any information observed given will be treated in the strictest confidence. As an active ReadiFood Volunteer, FAITH will keep your Volunteer Application on file.

I acknowledge that my conduct while working with FAITH will reflect upon the integrity of the charity and agree to abide by the guidelines set out in the “**Volunteer Manual**”, instructions or amendments to those guidelines provided in writing and to accept any instructions given to me by a member of staff of the Charity.

I hereby promise to not speak to members of the **media**, **local authority**, **police** or other representatives of any of other organisations, on any matter related to the activities of FAITH. Should I be approached by any of the above, I undertake to tell them to speak to the Director.

I grant permission to be “**DBS checked**” should FAITH deem this appropriate, fully realising that FAITH work with people at risk, families and children, and hereby state that there is nothing which I should have declared regarding convictions or past history which would deem me unsuitable to work for FAITH. Should there be something that you need to disclose, do so either in person to the Director, or in a separate document.

I am happy to have the information on this form stored digitally and to be contacted by FAITH via email and telephone.

By signing I also accept that I will be committing to a team of volunteers who will be relying on me to attend regularly. In the event that I am unable to be there for a given week, I will give good warning to the team and to the office.

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return this form to** **Faith Christian Group, 33 Boulton Road, Reading. RG2 0NH**

In order to help us consider your suitability to work as a volunteer, please tell us below:-

Why do you want to work with FAITH? What experience, if any, you have in this kind of activity.

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