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

Volunteer Worker Application Form



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

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

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

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

You must be over 18 to volunteer with Faith Christian Group

Next of kin name and phone number (in an emergency) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

It will be vital to **carry your phone** and share the number with your team(s). (**GDPR** data protection – see note below)

I am happy to share my mobile number **Yes □ No □** I am happy to share my email address **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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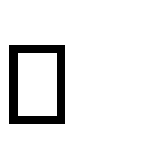
We have vacancies **most nights** and would like to fit you in where we have the greatest need

Which nights are you available?

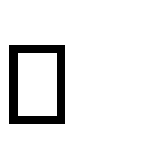
**Soup Runs**

-

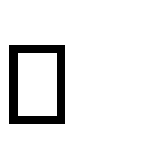
Tue



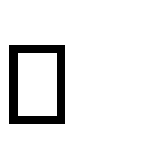
Wed



Thur



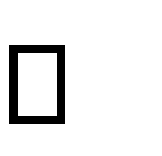
Fri



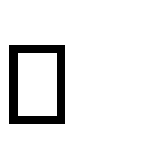
**Tea Bar**

-

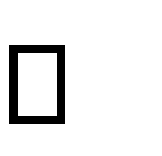
Sun



Can you help cover absences? Yes



No

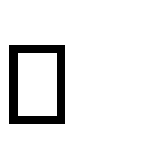


Could you

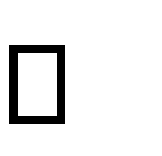
**collect sandwiches**

from

shops? late afternoon



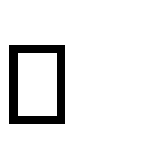
early evening



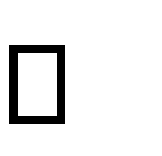
Could you

**give time cleaning**

the office/warehouse? morning



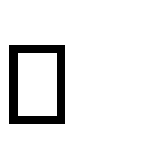
afternoon



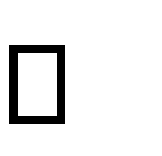
Are you applying for

**ReadiFood**

only? Yes



No



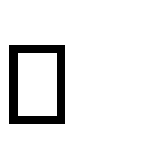
Which days are you available?

**Parcel deliver**

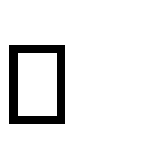
**ies**

-

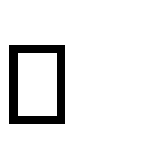
Mon



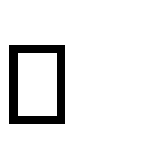
Tue



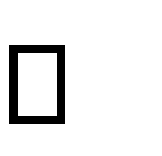
Wed



Thur



Fri



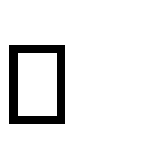
Are you

**DBS**

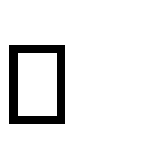
checked?

\*

Yes



No



If “Yes” please provide photocopy or original to be copied)

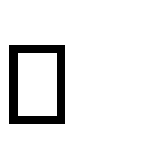
(

Do you hold a full, clean

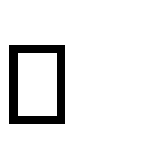
**driving license**

? \*

Yes



No



(

If not “clean” please give details)



|  |
| --- |
|  |

Please continue overleaf …………………

**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 pass-worded. \* denotes an optional reply

We need to **share** your phone number and email address with other volunteers 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.

We will require **two character references**, preferably from your pastor/church leader and cell 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 □**

We also recommend that you get a couple of people to regularly pray for you while you are involved with this outreach.

**Name and address of referees**:

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

**Declarations**:

I wish to apply to be a volunteer with FAITH Christian Group (Reading) Trust. I understand that any information given here will be treated in the strictest confidence. 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 FCG. 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 above information stored digitally and to be contacted by email and telephone with regards to matters related to my volunteering.

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** or scan and email to admin@fcg.org.uk

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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