



VOLUNTEER APPLICATION FORM - CONFIDENTIAL

Please complete this accurately, giving as many details as possible of your skills and experience relating to this volunteer application. You will be advised of the outcome of your application in writing.

Please ensure the finished form is printed out, signed, dated and returned to the address given on the last page. We are unable to accept forms returned as email attachments without a signature.

Please either type directly into this form using Microsoft Word or print out and complete the form in black ink and BLOCK CAPITALS.

1. APPLICANT'S DETAILS

<i>Title:</i>	<i>Surname:</i>	<i>First Name:</i>
<i>Home address:</i>		
Post Code:		
<i>Telephone No's: (please include full STD code)</i>		
Home:		
Work:		
Mobile:		
Email address:		
Do you hold a current full driving licence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have any penalty points on your driving licence?	Yes <input type="checkbox"/>	No <input type="checkbox"/> (if yes please give details below)
Is there anything concerning your medical history or state of health that is relevant to your application?	Yes <input type="checkbox"/>	No <input type="checkbox"/> (if yes please give details below)

2. PERSONAL STATEMENT

This section is for you to give specific information in support of your application. Please set the information out on a maximum of 2 sides of A4 paper.

Please detail your interest in volunteering at ELHAP, including any skills, knowledge, training, education, work experience that you are bringing and any skills and experience that you wish to acquire:

3. REFERENCES

Please ensure that you give a minimum of two references. The first of your references must be your present employer and your relevant line manager. If you are unemployed, this should be your last employer, or if you are studying, your head-teacher or college tutor. You may also provide the name of a personal referee as well as your employment references if you wish.

Current Employer
Name:
Job Title
Organisation/Address (in full):
Telephone:
Email:
In what capacity do you know them?

Previous Employer
Name:
Job Title
Organisation/Address (in full):
Telephone:
Email:
In what capacity do you know them?

Previous Employer
Name:
Job Title
Organisation/Address (in full):
Telephone:
Email:
In what capacity do you know them?

Previous Employer/Personal Referee
Name:
Job Title
Organisation/Address (in full):
Telephone:
Email:
In what capacity do you know them?

4. DECLARATION AND SIGNATURE

In accordance with the Data Protection Act 1998, the information provided on this form will be used in the recruitment and selection process and may be disclosed to all those who need to see it. It will also form the basis of the confidential personnel record of the successful candidate. In the case of unsuccessful candidates the information will be destroyed after twelve months. In addition, it will be held on a database and used for equal opportunities monitoring purposes.

I confirm that I do not object to the information collected on this form being transferred onto computer for the purpose of anonymous statistical reporting, in accordance with statutory requirements and for the basis of compiling correspondence and to assist ELHAP (A Special Needs Adventure Playground) in equal opportunities monitoring in respect of volunteering applications.

I agree that ELHAP (A Special Needs Adventure Playground) has the right to validate any of the information provided.

The information supplied in this application form is accurate to the best of my knowledge.

.....
Signed

.....
Date

Thank you for completing the form.

Please print your completed form and return – together with your completed criminal records declaration and equal opportunities monitoring form to:

**ELHAP (A Special Needs Adventure Playground)
119, Roding Lane North
Woodford Bridge
Essex, IG8 8NA**

Criminal Records, Disqualification and Declaration - CONFIDENTIAL

Please complete all sections.

The nature of ELHAP's work allows us to ask questions about your entire criminal record because it is exempted from the Rehabilitation of Offenders Act. With some exceptions, having a criminal record will not necessarily bar an individual from volunteering with ELHAP (see our policy on the recruitment of ex-offenders at www.elhap.org.uk).

Are you subject to any current outstanding disciplinary action or legal proceedings? <i>If yes, please give details below</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a criminal offence or cautioned, reprimanded or given a final warning by the police ('spent' or 'unspent')? <i>If yes, please give details of all offences, penalties and dates below</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you disqualified from working with children or vulnerable adults? <i>If yes, please give details below</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you aware of any police enquiries undertaken following allegations made against you that may have a bearing on your suitability for the post? <i>If yes, please give details below</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>Please continue overleaf</i>		

Declaration – to be completed by all applicants

I confirm that the information I have given is correct and complete and that any false statements or omissions may render me liable to dismissal without notice or in some instances, referral to the police.

I understand and agree that data in the application form will be used and processed for recruitment processes. I understand and agree that should I become a volunteer, the information will also be used for volunteer related purposes. I agree to ELHAP (A Special Needs Adventure Playground) holding and processing this information.

Signed:

Dated:

Equal Opportunities Monitoring Form - CONFIDENTIAL

ELHAP (A Special Needs Adventure Playground) is committed to achieving equality of opportunity and continually monitors the effectiveness of its policy. To do this we ask applicants to supply information about their ethnic origin, gender, age and whether they have a disability. In addition, we are now asking for information about sexual orientation and religion or belief, this is to assess year on year our progress in welcoming people regardless of sexual orientation and religion or belief. The information is confidential and is not seen by the selection panel. It will also only be used to monitor our recruitment and selection process. Using this information we can work to ensure that no-one experiences unfair discrimination. Our ethnic categories reflect national census and categories. You are therefore asked to complete this section and tick the relevant boxes below.

Gender: Male Female

Your Date of Birth:

Ethnicity

How would you describe your ethnic origin? (As defined in 2001 census)

Asian, Asian British, Asian English, Asian Scottish, Asian Welsh

- Bangladeshi Indian Pakistani
 Any other Asian background (please specify)

Black, Black British, Black English, Black Scottish, Black Welsh

- African Caribbean
 Any other Black background (please specify)

Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh or Ethnic Group

- Chinese
 Any other Ethnic background (please specify)

Mixed

- White & Asian White & Black African White & Black Caribbean
 Any other mixed background (please specify)

White

- British English Scottish Welsh
 Irish Irish Traveller
 Any other White background (please specify)

Marital Status:

- Divorced In a Civil Partnership Married Separated
 Single Widowed Other

Religion or Belief:

- Buddhist Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
 Hindu Jewish Muslim Sikh
 None Prefer not to say Any other religion or belief (please specify)

Sexual Orientation:

- Bisexual Gay man/Homosexual Gay woman/Lesbian
 Heterosexual/Straight Prefer not to say