

HOME-START BRISTOL

Registered Charity No: 1116207
Company No. 5745817
Unit 11, The Greenway Business Centre,
Doncaster Road,
Southmead, Bristol, BS10 5PY
Tel: 0117 9501170
E-mail: admin@homestartbristol.org.uk



CONFIDENTIAL - Volunteer Application Form

Name:			
Current address (including postcode):			
If you have been at this address for less than five years, please give previous address:			
Home telephone no:			
Mobile telephone no:		Email address:	
Emergency contact details (name, contact telephone number, relationship to you):			
Nationality:		Ethnic origin:	
Do you speak any additional languages (including sign language):			
What type of transport would you use?		If car, do you have a current clean driving licence?	YES/NO
Please give information about your own parenting experience – e.g. are you a parent/ step parent/ foster carer? (Please give ages of children)			

What do you/did you find enjoyable about parenting?
What do you/did you find challenging?
Please give details of any voluntary or paid work you have done, that is relevant to working with children and families:
Have you any commitments which could affect your work with Home-Start Bristol (e.g. part-time work, days or times when you are not available)?
What are your hobbies and leisure interests?
Have you any skills or personal experiences which may be relevant to your work as a volunteer for Home-Start Bristol?

How did you hear about volunteering opportunities with Home-Start Bristol?
Additional information about why you would like to become a volunteer for Home-Start Bristol: (continue on a separate sheet if necessary)
Do you give your permission for all this information to be kept on file and on the computer in the Bristol Home-Start office? YES/NO (This information remains confidential and will not be passed on to any third party)

<p>REFERENCES: Please give the name and address of two referees (not a relative) who have known you for a minimum of 2 years who may be contacted by Home-Start. Please ask permission prior to submitting referees and include full address.</p> <p>Please include at least one professional reference, (previous employer wherever possible; alternatively, school, college or other professional such as a religious leader or a volunteer supervisor) who may be contacted by Home-Start. Please ensure that at least one of your referees is able to comment on your suitability to work with children, young people and vulnerable adults.</p>	
Referee 1	Referee 2
Name: Address: E-mail: Tel no: In what capacity do you know this person? How long have you known them for?	Name: Address: E-mail: Tel no: In what capacity do you know this person? How long have you known them for?

CONFIDENTIAL

As volunteers are in a privileged position visiting families in their own homes and have contact with young children, Home-Start has a responsibility to ensure that no one becomes a volunteer who would misuse this trust. Therefore, it is essential that you complete and sign this form.

Name:	
Have you had any personal contact with Social Services/Social Work Department or NSPCC/Children 1 st in connection with children in your care?	Yes / No
Do you have any medical condition (physical or mental) that could affect your work as a volunteer?	Yes / No
Have you ever been dismissed from any paid or voluntary work?	Yes / No
Have you ever been convicted of a criminal offence?	Yes / No
Are there any matters outstanding which may lead to a criminal prosecution?	Yes / No
If you answer yes to any of the above questions, please give details:	

- I give permission for Home-Start Bristol to carry out a police check for criminal convictions, or any other checks with the Department of Health, Social Services or Department for Education. (I understand that my National Insurance number may be required). **Yes/No**
- I know of no reason why I would be unsuitable to be a Home-Start volunteer. **Yes/No**
- I have read, understood and consent to the way HSB will use my personal data, as described in the Privacy Notice. **Yes/No**

Signed: _____ **Dated:** _____