



# Volunteer Application Form

Thank you for your interest in becoming a volunteer. We aim to engage our volunteers in areas of activity that they express an interest in.

If you have any difficulties completing this application form, please phone Petra or Sally on 01646 684220 or email [enquiries@sunderlandtrust.com](mailto:enquiries@sunderlandtrust.com). If you would like to find out more about the Pembroke Dock Heritage Trust, log onto our website [www.sunderlandtrust.com](http://www.sunderlandtrust.com).

## How we use your information

By providing the information requested in this application form, you are consenting to its use for the purpose of processing your application and assessing your suitability to become a volunteer. The information will also be used for monitoring our volunteer recruitment processes and for use where relevant in other personnel procedures. Your information will not be passed onto third parties.

<b>Name</b>				
<b>Address</b>				
<b>Postcode</b>				
<b>Email Address</b>				
<b>Phone</b>	<b>Home</b>		<b>Mobile</b>	

<b>Date of Birth</b>	
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<b>Please indicate whether you fall into the following categories</b>	<b>Unemployed</b> <input type="checkbox"/>	<b>Migrant Worker</b> <input type="checkbox"/>	<b>Disabled</b> <input type="checkbox"/>	<b>BME</b> <input type="checkbox"/>	<b>Asylum Seeker</b> <input type="checkbox"/>
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<b>Why are you interested in volunteering? (Tick all that apply)</b>	<b>To learn skills or gain experience</b> <input type="checkbox"/>	<b>To meet new people</b> <input type="checkbox"/>	<b>Interested in the subject matter</b> <input type="checkbox"/>	<b>To help in the local community</b> <input type="checkbox"/>	<b>To help gain employment</b> <input type="checkbox"/>
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<b>Do you have any special requirements or disabilities? (e.g. wheelchair access, large print, induction loop, etc.)</b>

<b>Are you Welsh speaking?</b>	
<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>

**Please indicate which area/areas you may be interested in**

<b>Workshop/ Conservation</b> <input type="checkbox"/>	<b>Reception/ Front of House</b> <input type="checkbox"/>	<b>Coffee Shop</b> <input type="checkbox"/>	<b>Archive</b> <input type="checkbox"/>	<b>Education</b> <input type="checkbox"/>	<b>Outreach Presentations</b> <input type="checkbox"/>	<b>General</b> <input type="checkbox"/>	<b>Events</b> <input type="checkbox"/>
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**Please indicate which days and times suit you. Please note: This does not commit you, but simply gives us an idea when you are available.**

<b>Monday</b> <input type="checkbox"/>	<b>Tuesday</b> <input type="checkbox"/>	<b>Wednesday</b> <input type="checkbox"/>	<b>Thursday</b> <input type="checkbox"/>	<b>Friday</b> <input type="checkbox"/>	<b>Saturday</b> <input type="checkbox"/>	<b>Sunday</b> <input type="checkbox"/>
<b>Morning</b> <input type="checkbox"/>		<b>Afternoon</b> <input type="checkbox"/>		<b>Evening</b> <input type="checkbox"/>		

**Further notes on availability**

**Is there anything that would prohibit you working with vulnerable adults or children?**

**Yes**

**No**

**If yes, please state here:**

**What relevant skills, experience and qualifications do you have that you feel could be relevant to the project (now or in the future)?**

Please give the name of two references. These should be people who have known you in a professional capacity, but not a family member.

<b>Name</b>		<b>Name</b>	
<b>Address</b>		<b>Address</b>	
<b>Telephone Number</b>		<b>Telephone Number</b>	
<b>Email add</b>		<b>Email add</b>	
<b>Capacity in which you know this person</b>		<b>Capacity in which you know this person</b>	

The information I have supplied in making this application to become a volunteer is true and accurate.

<b>Signed</b>	
<b>Print Name</b>	
<b>Date</b>	