



INVESTOR IN PEOPLE

Local Solutions

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Office Use Only
Ref. No.

VOLUNTEER APPLICATION FORM PRIVATE AND CONFIDENTIAL	Please complete in black ink or typescript
This form is also available in Large Print, Braille and Tape Cassette	

1. JOB DETAILS	
Where did you see this opportunity advertised?	
Application for Post of:	
Department/Location:	

2. PERSONAL DETAILS	
Title (Mr, Mrs, Miss, Ms, Other)	
Forename:	
Surname:	
Address (including postcode):	
Daytime Telephone Number:	Evening Telephone Number:
Mobile Telephone Number:	E-mail address:
Are you a UK Resident:	YES/NO
If NO, Do you hold a work permit?	YES/NO
	Expiry Date:

Data Protection Act 1998

Information on this form may be held on computerised records. Strict confidentiality will be observed and disclosures will only be made for payroll and personnel administration purposes.

3. PRIVATE AND CONFIDENTIAL

CRIMINAL CONVICTIONS (Please refer to guidance documents).

Do you have any previous convictions, cautions, reprimands or final warnings? YES/NO
 Are there any criminal proceedings pending against you? YES/NO

If **YES**, please detail offence(s) including dates and sentence(s) on a separate sheet and attach in a sealed envelope marked confidential.

Engaging, Enabling, Enhancing

Local Solutions. Registered as a Company Limited by Guarantee No. 1792921. Charities Act No. 515060

4. EQUALITY OF OPPORTUNITY

Date of Birth:	
If you are related in any way to an employee of Local Solutions please give details here	
Gender	Male / Female

DISABILITY

- i) Do you consider yourself to have a disability? (Please Tick) Yes No
- ii) Would the provision of any aids or adaptations assist you in carrying out the duties of this post?
YES/NO
- iii) If YES, Please State:

- iv) Is there anything we need to know about your disability in order that you can have a fair interview?
E.g. do you need a hearing loop, an accessible interview room? Please state:

ETHNIC ORIGIN

I would describe my ethnic origin as – please tick

WHITE:

English Scottish Welsh White Irish

MIXED:

White and Black Caribbean White and Black African White and Asian

ASIAN OR ASIAN BRITISH

Indian Pakistani Bangladeshi

BLACK OR BLACK BRITISH

Black Caribbean Black African

CHINESE OR OTHER ETHNIC GROUP

Chinese

Any other ethnic background – please state here:

Ethnic origin questions are not about nationality, place of birth or citizenship. They are about colour and broad ethnic group. UK citizens can belong to any of the groups indicated. These groups are recommended by the Commission for racial Equality and take account of those used in the 2001 Census.

5. PLEASE TELL US ABOUT ANY QUALIFICATIONS AND/OR SKILLS YOU WISH TO USE WHILST VOLUNTEERING?

6. PLEASE GIVE A BRIEF DESCRIPTION OF YOUR WORK HISTORY AND/OR VOLUNTARY WORK

6. OTHER RELEVANT SKILLS AND KNOWLEDGE

The following section will ensure that we successfully recruit volunteers who believe in values sought by Local Solutions. Please indicate in the space the below:

Your reasons for volunteering with Local Solutions:

Areas you are interested in volunteering:

What you would like to gain from volunteering:

Please indicate by placing a tick in the appropriate box whether you are prepared to give permission for us to release your personnel details (as appropriate) should we receive a request from a third party e.g. a prospective employer, etc.)

YES NO

11. DECLARATION

I certify that the information on this application form is accurate and true. I give my consent to the processing, transfer and disclosure by the Company of all information submitted by me during the recruitment process and throughout any subsequent periods of volunteering and for pre-volunteering checks, equal opportunities monitoring and training. (Data Protection Act 1998)

I understand that, if appointed, any false statement later revealed may result termination of my placement.

Signed:

Date:

(If you return this form by e-mail without a signature you will be assumed to have accepted the above declaration)