# cirencester_logo­

Cirencester Foodbank

Cirencester Baptist Church

Chesterton Lane

Cirencester

GL7 1YE

info@cirencester.foodbank.org.uk

www.cirencester.foodbank.org.uk

# Volunteer Application Form

Thank you for your offer to help with Cirencester Foodbank. In order for us to process your application please would you answer the following questions:

*(If you have any questions about your application or would like help completing it please contact Rachel Brindley, info@cirencester.foodbank.org.uk*

**References** *(not family members please)*

*Referee 1*

Name:

Daytime tel. number or email address:

Relationship to you:

*Referee 2*

Name:

Daytime tel. number or email address:

Relationship to you:

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Name: (BLOCK CAPITALS)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Next of Kin:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact in case of emergency** (if different)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I would be interested in helping regularly in the following area(s):**

* Foodbank Centre Warehouse

Marketing/Public relations Fundraising

Admin Delivery or Collections (using own vehicle)

Trustee Ad-hoc events (supermarket collections etc)

**I am available for:** *(please tick as appropriate)*

Ad-hoc events Monday in Cirencester 12.30pm-4pm

Monday in warehouse 6pm-7.30pm Tuesday in Tetbury 9.15am-11.15am

Wednesday in warehouse 10am-12.30pm Wednesday in Fairford 12.45pm-2.45pm

Thursday in Cirencester 9.00am-12.30pm Thursday in warehouse 6pm-7.30pm

Do you have any health problems that we should be aware of? Yes No

If yes, please give details:

Please tell us your previous work experience or qualifications:

Would you be willing to for us to submit for a DBS criminal record check, if required? Yes No

Do you have any criminal convictions (except those ‘spent’ under the Rehabilitation of Offenders Act 1974)? (NB: this does not necessarily prevent you from volunteering) Yes No

If yes, please give details:

Please state your reasons for volunteering:

Please give us any information you think may be useful to us:

How did you hear about volunteering at Cirencester Foodbank? …………………………………………………………….

Data protection: Cirencester Foodbank will hold your details on file but will not release them to a third party.

I confirm that the above information is complete and correct. I consent to the processing of this data in the consideration of my application and during the course of my volunteering, if applicable.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_