**Thank you for your offer to help with St Mary Magdalene Church’s Community Team. In order for us to process your application please would you answer the following questions:**

**St Mary Magdalene Church**

**Community Volunteer**

**Application Form**

*(If you have any questions about your application or would like help completing it please contact Anna Price,* anna.price@stmmgorleston.org.uk*, Tel. 01493 494248)*

**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:

Address:

Postcode:

Tel. (mobile preferably):

Email:

Date of Birth:

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

Name:

Tel No:

Relationship:

**Next of Kin:**

Name:

Tel No:

Relationship:

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

|  |  |  |  |
| --- | --- | --- | --- |
| Administration | Volunteer Team Leader | Gardening | Decorations/flowers |
| Room preparations (chairs, tables, hoovering) | Packing parcels | Supermarket liaising/collections | Youth Team |
| Driver - Delivery/collections (using own vehicle) | Organising of incoming stock | Chef/Cook | Elderly/dementia support |
| Pastoral Support | Kitchen support | Maintenance/DIY | 1-2-1 support for volunteers with additional needs |

I have specialist skills to offer:………………………………………….

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

* One off events i.e. Large-scale seasonal community events / occasional back up support
* ……….. hours a week AM / PM on: Mon / Tues / Wed / Thurs / Fri / Sat
* Full Day(s) on: Mon / Tues / Wed / Thurs / Fri / Sat
* Other:

Do you have a clean driving licence? (not necessary for all roles) *please circle:* Yes / No

How did you hear about volunteering at St Mary Magdalene and why would you like to volunteer?

Do you have any health issues, care or support needs or disabilities that we should be aware of? *(please circle)*  Yes / No

If yes, please give details:

Please tell us your previous work experience or qualifications:

**Safeguarding**

The following questions are in line with our commitment to safer recruitment and ensuring we have sufficient support in place for volunteers. Please note having unspent convictions etc would not necessarily prevent you from volunteering. Additional information may be required if the role is eligible for a DBS/PVG / Access NI check.

Do you have any criminal unspent charges or convictions (under the Rehabilitation of Offenders Act 1974)? (NB: this does not necessarily prevent you from volunteering) Yes / No

If yes, please give details:

Has your name been placed on a list of people barred from working with children or vulnerable adults? *(please circle)* Yes/No

Are you currently under investigation by the police? *(please circle)* Yes / No

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

**Data protection:**

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, where applicable.

Signature: Date:

Signature of parent/guardian if applicant is under 18: Date:

Please return completed form to:

St Mary Magdalene Church is committed to protecting data privacy and will process your personal data in accordance with data protection legislation. Your data will only be used for purposes relating directly to your volunteering activity. It will only be shared with church or food bank personnel responsible for your volunteering, the Trussell Trust and specific systems provided by third-parties that directly support the running of the food bank.

Anna Price, Community Lead

St Mary Magdalene Church

41 Nuffield Crescent

Gorleston

Great Yarmouth

NR31 7LL

**Thank you!**