

COMMUNITY VOLUNTARY SERVICES TENDRING

APPLICATION FORM FOR CVST AND HILL VOLUNTEERS

Volunteer role that you are applying for.....

Mr/Mrs/Ms/Miss.....First NameSurname.....

Address

Postcode..... Email..... Tel No.

Birth day and month:.....

How did you hear about CVST/HILL?

Vol Bureau Doctor Friend Relative Library Radio/TV
 Leaflet Newspaper Other Please Specify.....

Please tell us about any work, volunteering, personal experience or skills that you have that are relevant to being a volunteer with CVST

.....

Present Occupation

Student Employed Non-employed Retired Job Seeker
 Carer (not actively seeking paid work)

What are your interests and hobbies?.....

.....

Please tell us what qualifications you have:

Qualification	Date achieved

Availability

I would be available to help MORNINGS/AFTERNOONS/EVENINGS / WEEKDAYS/WEEKENDS (please delete accordingly) Are there any specific days or times when you are already committed?

.....

Would you be willing to be approached occasionally, by CVST to consider helping with individual events? eg Exhibitions, Air show, Victorian Christmas Market, Seminars. Y/N

What do you hope to achieve from volunteering?

- | | |
|---|--------|
| 1) To gain experience | YES/NO |
| 2) Update skills. | YES/NO |
| 3) To offer practical support to help others. | YES/NO |
| 4) To overcome boredom or loneliness. | YES/NO |
| 5) Other (please state) | |

References

Please supply details of 2 people who know you well enough to comment about your suitability for this role.

They should not be family members or people that you share a house with. If you are not sure about who to put we are happy to discuss this with you

Referee 1

Name:
Address:.....
Email:.....Phone:

How does this person know you?.....

How long have they known you?

Referee 2

Name:
Address:.....
Email:.....Phone:

How does this person know you?.....

How long have they known you?

To the best of my knowledge and belief the information I have given is correct.

Signed Date

Please return this form to: CVST 20 – 22 Rosemary Rd, Clacton, CO15 1NZ

This information will be treated as confidential but I understand that my details may be made known to any relevant organisation. My involvement with any organisation is subject to satisfactory references.



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