



Volunteer Link Worker Application Form

Name.....
Address.....
.....
Post code
e-mail address
Telephone number: Day.....
Evening.....
Date of Birth.....
Are you an active member of a faith community?.....
If so, which one?.....
How did you find out about us?.....
.....
WYCCP expect a minimum of 2 hours per week (Mon-Fri) from the volunteer link workers. Please indicate your availability.....
.....
.....

Do you require a work permit? Yes No

Do you have a valid driving licence? Yes No

Do you have use of a vehicle? Yes No

Please explain why do you want to volunteer with WYCCP?

Please indicate any volunteering experience undertaken.

Please indicate any relevant personal interests or professional qualifications that may influence your application.

Please provide the details of two persons who will give references for you. Referees cannot be relatives, spouses or life partners and they should have known you for at least one year. References will be requested upon receipt of your application.

Name	Name
Address	Address
Tel No:	Tel No:
Relationship	Relationship

CRIMINAL CONVICTIONS

The work for which you are applying is likely to involve direct contact with vulnerable people. It is therefore exempt from the Rehabilitation of Offenders Act 1974. You will be asked to provide details of any pending prosecution or convictions (including cautions, boundovers, supervision orders or secure orders) which you may have, even if they would otherwise be regarded as 'spent' under this act. The information you give will be treated in confidence. As an organisation committed to the rehabilitation of offenders, we welcome applications from ex-offenders; contact us to discuss any issues in confidence.

I declare that the information in this form is true and complete. I understand that any willful mis-statement or omission may mean I cannot volunteer with WYCCP.	
Signature	Date: