

# VOLUNTEER APPLICATION FORM



The information you provide will be stored in confidence under the provisions of the Data Protection Act. Only authorized staff will have access to your information.

## Personal Details

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

Address \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Are you a graduate student or an undergraduate student? \_\_\_\_\_

If you are involved with us as a volunteer and an emergency arises, whom should we contact?

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

Telephone: \_\_\_\_\_

## Your Skills & Interests

1. Have you ever done any volunteer work before?

Yes  No  If you answered yes, please tell us a little about the experience.

2. Why do you want to volunteer now? What has motivated you to get in touch with us?

3. When are you available for volunteer work?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							