

Volunteer Application Form
Home-Start Mid & West Suffolk
Registered charity no. 1127760



Home-Start is committed to safe recruitment practice as an important part of safeguarding and protecting children and vulnerable adults

Confidential: If you have difficulty completing this form, please ask your Home-Start Co-ordinator for assistance.

Which opportunities are you interested in (please tick) v

Home Visiting Volunteer Group Volunteer

Name:			
Address including postcode:		Home telephone number:	
		Mobile telephone number:	
Email address:			
Date of Birth:		Gender:	

References: Please give the name & address of 2 referees that you have known for a minimum of 2 years (not a relative), include at least 1 professional reference, (previous employer wherever possible; alternatively, school, college or other professional such as a religious leader or a volunteer supervisor) who may be contacted by Home-Start.

Please ask permission prior to giving referee details and confirm full address with them

Referee 1	Referee 2
Title:	Title:
Name:	Name:
Address:	Address:
Postcode:	Postcode:
Email address:	Email address:
Time known this person: In what capacity:	Time known this person: In what capacity:

Please give information about your experience of parenting or any contact you may have had with children and families. (Continue on a separate sheet if necessary)

E.g. What did/do you find enjoyable or challenging about parenting/parenting experience?

Please give details of any information that may support your application. (Include any relevant skills, interests, past employment/voluntary work) (Continue on a separate sheet if necessary)

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The minimum time commitment we ask of volunteers is 2- 3 hours per week on a regular basis for at least one year with occasional additional time for training and support/supervision is this manageable? Yes/No			
How did you hear about Home-Start?		What type of transport would you use?	
Ethnic Origin (please tick) ✓		Do you have a Health Condition or is there any particular support you would need to help you to volunteer?	
White British			
White Irish		Bangladeshi	
White other		Pakistani	
Black Caribbean		Chinese	
Black African		Other	
Black other		Prefer not to say	
Any Mixed			
Have you had any personal contact with Social Services/Social Work Department or NSPCC in connection with children in your care? Have any of your children been subject to a child protection, child in need plan or assessment?			Yes/No
Have you ever been dismissed from any paid or voluntary work?			Yes/No
Have you ever been arrested or had contact (e.g. received a warning/caution/ attended court) with the police for any type of criminal offence?			Yes/No
Are there any matters outstanding which may lead to a criminal prosecution?			Yes/No
If you answer yes to any question please give details below or if you prefer you can contact Amanda Jacques-Scheme Manager, to discuss your application in confidence on 01379 678552.			
<p>If you do not declare existing or spent cautions or convictions you may not be selected. However, if you declare any of the above it may still be possible to become a volunteer.</p>			
I know of no reason why I would be unsuitable to be a Home-Start volunteer. I will report any changes in my circumstances which may affect my role			Yes/No
<p>I give permission for Home-Start Mid & West Suffolk to carry out a DBS check at enhanced level. I understand that failing to declare my involvement no matter how minor, with the Police/ Criminal Justice system may result in my being deemed unsuitable as a volunteer. I understand that my national insurance number will be required and that personal information about me will be held in records (including electronic records) some of which may be sensitive information such as age, race, gender, disability and that this information may be used for monitoring purposes. I agree to the scheme holding this information and understand that I may ask to see my records at any time.</p> <p>To view our full privacy notice, please visit our website: www.homestartmidandwestsuffolk.org.uk</p>			
Signed:			Date:

Please return your completed form(s) to:- Home-Start Mid & West Suffolk, 20 Broad Street, Eye, Suffolk IP23 7AF or email office@homestartmidsuffolk.org.uk

For further information please telephone 01379 678552