Role Applied For:



**Volunteer Application Form**

Thank you for your interest in becoming a volunteer.

Please provide as much information as you can on this form. This form will be kept strictly confidential.

**Section 1: Personal Information**

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| **Your name** |  |
| **Address** |  |
| **Email address** |  |

**Section 2: Previous experience**

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| --- | --- |
| **1 Have you been a volunteer before?**  | **Yes No**  |

If yes, please provide a brief description of the role and the organisation you volunteered for and tell us what you enjoyed about it:

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**Section 3: Availability**

**2 When would you be available to volunteer for the Trust? Tell us how will you fit in volunteering around your other commitments ?**

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**Section 4: Skills, Knowledge and Hobbies**

**3 What skills and experience do you have that you think will make you effective for this beneficiary volunteer role (please refer to the role description and person specification)**

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**4 Please provide details of your interests and hobbies**

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**5 Please explain why you would like to be a volunteer. What do you hope to gain?**

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**6 Do you have any particular needs to enable you to fulfil the volunteer role you have applied for? For example, specialist equipment such as a telephone, IT support**

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**Section 5: References**

**7 Can you please provide us with the name and contact details of two people who would provide us with a reference for you. (Please note that we will not contact your referees until we have spoken to directly and confirm you want to proceed.)**

**Reference 1**

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| --- | --- |
| **Name** |  |
| **House Name / Number** |  |
| **Street Name** |  |
| **Town City** |  |
| **Postcode** |  |
| **Email address** |  |
| **Telephone number:** |  |
| **Relationship to Applicant :** |  |

**Reference 2**

|  |  |
| --- | --- |
| **Name** |  |
| **House Name / Number** |  |
| **Street Name** |  |
| **Town City** |  |
| **Postcode** |  |
| **Email address** |  |
| **Telephone number:** |  |
| **Relationship to Applicant:** |  |

Please return your completed application form **by post to** Annabelle Blackham, The Thalidomide Trust, 1 Eaton Court Road, Eaton Socon, St Neots, Cambridgeshire, PE19 8ER  **or Email** the application form to: hello@thalidomidetrust.org