

# SALFORD LOAVES & FISHES Application Form for Volunteers

Name	
Address	
Telephone number	
Mobile	
Email address	
Date of birth	

Where did you hear about Salford Loaves and Fishes?	
What skills do you feel you can bring to the role of volunteer?	
Please refer to the Role Description	
What is your reason for wanting to volunteer?	

What experiences whether in paid employment or in the voluntary sector do you have that may be useful in this role?	
Have you any health problem(s) which might affect your work with vulnerable adults? Yes No	
Note: Declare in confidence any health issues that may affect your ability to work with adults. This question is primarily intended to help you if you subsequently need to withdraw from work e.g. because of a recurring health issue.	

IMPORTANT: All volunteers are required to undertake an enhanced DBS check (formerly CRB). You are invited to disclose details of any criminal convictions prior to the DBS application by completing a Self Declaration Form.

#### **Referees:**

You must provide details of 2 Referees. Referees must have known you for a minimum of 2 years.

#### **Referee One**

Name	
Address	
Telephone number	
Position	

### **Referee Two**

Name	
Address	
Telephone number	
Position	

### **Emergency Contact Details / Next of Kin**

Name / Relationship	Contact Details

I confirm that all the above information is as accurate as possible and I give permission for Salford Loaves and Fishes to contact my referees direct. I understand that the contents of this form are confidential and will only be shared with the Volunteer Co-ordinator and relevant personnel at Salford Loaves and Fishes.

## Signed:

Date:

Please return to:

Volunteer Co-ordinator Salford Loaves and Fishes 1 Paddington Close Salford M6 5PL