

Application Form for Volunteers (England)

Home-Start Shropshire 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 the Home-Start Co-ordinator for assistance.

Name			
Address including postcode			
If you have been at this address less than five years, please give previous address			
Home telephone no: Email address:			Mobile telephone no.:
Date of birth:			Place of birth:
Emergency contact name and phone no.			
<p>REFERENCES: Please give the name and address of two referees that you have known for a minimum of two years (not a relative) include at least one 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.</p> <p>Please ask permission prior to submitting referees details and confirm full address.</p>			
Referee 1 - time known this person In what capacity?			Referee 2 - time known this person In what capacity?
Name: Address: Postcode: Email: Telephone:			Name: Address: Postcode: Email: Telephone:

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We would like to get a picture of your experience to date, in the first box please give us details of any paid employment, in the second box details of any voluntary or unpaid work and in the third box details of gaps in employment with reasons e.g. career break to look after children or other dependants, travelling, training or education.

Please tell us about any paid employment, starting with most recent

Employer	Job title	From	To	Brief description of duties	Reason for leaving

Please tell us about any voluntary or unpaid work, starting with most recent

Employer	Job title	From	To	Brief description of duties	Reason for leaving

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Please tell us about gaps in your employment history, starting with the most recent

From	To	Reason

Do you speak any additional languages (including sign language)			
What is the maximum time you could offer to Home-Start as a volunteer on a regular weekly basis? (suggested 2 to 3 hours per week)			
Have you any commitments which could affect your work with Home-Start e.g. part-time work?			
What type of transport would you use?		If car - do you have a current clean driving licence?	Yes/No

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1) Please give information about your own parenting experience: e.g. are you a Parent/step-parent/foster carer. Please give ages of children.

2) What did/do you find enjoyable about parenting?

3) What did/do you find challenging?

What are your hobbies and leisure interests?

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How did you hear of Home-Start?

Why would you like to become a Home-Start volunteer?

Have you any skills or personal experiences which may be relevant to your work as a volunteer for Home-Start? (e.g. budgeting, cooking, DIY etc)

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Do you have a physical or mental condition which has a substantial effect on your ability to carry out normal day-to-day activities which has lasted, or is likely to last more than 12 months? (Discrimination Act 1995) Yes / No

If yes please give details:

Do you have any learning difficulties Yes / No

If yes what are these?

Do you require additional aids to undertake volunteer training?

Do you have any conditions which may make it difficult for you to support a family with a baby?

Is there any other information you would like to add?

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As volunteers are in a privileged position visiting families in their own homes and have contact with young children, Home-Start has a responsibility to ensure that no one becomes a volunteer who would misuse this trust. Therefore, it is essential that you complete and sign this form.

The Disclosure and Barring Service has a guide which provides a simple and clear explanation of the disclosure application process. The guide can be viewed online at www.homeoffice.gov.uk/publications/agencies-public-bodies/dbs/dbs-checking-service-guidance/app-guide-dbs-form

Name:	
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 common assessment framework (CAF)?	Yes/No
Do you consider yourself to have a disability or health condition and if so what adjustments could Home-Start provide to enable you to volunteer? Please provide detail, continue on separate sheet if required.	Yes/No
Have you ever been dismissed from any paid or voluntary work?	Yes/No
Have you ever been arrested or had contact 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
<p>If you answer yes to any question please give details:</p> <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

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I give permission for Home-Start Shropshire, to carry out criminal record checks at enhanced level with the appropriate agency.

I understand that my National Insurance number, passport and/or drivers licence may be required for identification purposes.

I understand that Home-Start may hold personal information about me in paper records and on their computer, including sensitive information such as age, race, sex and disabilities that they will use for their monitoring purposes. I agree to them holding this information and understand that it may be shared with Home-Start UK for Quality Assurance purposes.

I understand that I may ask to see my records at any time.

Signed: _____

Date: _____

As you will be completing an Enhanced Disclosure form detail of any criminal convictions or cautions found will be passed onto to Home-Start Shropshire. Therefore it is important that you highlight any issue we need to be aware of on your application form.

If something is highlighted on your disclosure this will be discussed with you in confidence. Following the meeting a decision will be made whether we can proceed with your application.

If you have any concerns please discuss this further with the Senior Co-ordinator at Home-Start Shropshire.

Please return the completed form to:

The Administrator
Home-Start Shropshire
Ludlow Mascall Centre
Lower Galdeford
Ludlow
SY8 1RZ

Email: adminsouth@homestartshropshire.org.uk

Tel. 01584 878532

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Interview date		
Reference requested	1 (date)	2 (date)
Reference received	1 (date)	2 (date)
DBS requested	Date received	No.
Prep course completed (date):		
Safeguarding & promoting welfare of children code of conduct signed (date):		
Info given, health & safety, personal safety (date):		