



St. David's Bradbury Day Centre

# VOLUNTEER APPLICATION FORM

## 1. Personal Details

Name .....
Home Address .....
.....Post Code .....
Phone (day) ..... (eve) .....
Date of birth .....

## 2. Skills and Interest (please give details about any of the following)

Please indicate the type of volunteer work you are interested in (please tick all that apply)

- Assisting with regular social events (eg. lunch clubs, coffee mornings, bingo nights etc)
- Befriending (offering friendship, companionship and support)
- Helping out at one off events (eg. Social outings, Christmas Parties etc)
- Other (please give details)
- I am responding to an advert for a specific voluntary post (please give details)

.....

What is your current/past occupation?

.....

What experience do you have of either voluntary or paid work which you feel would be relevant.

.....

.....

What hobbies, interests or skills do you have that you can bring to St. David's?

.....

Please state briefly why you are interested in becoming a volunteer with St. David's:

.....

3. Availability

At What times are you interested in volunteering? (please tick)

<input type="checkbox"/> Flexible	<input type="checkbox"/> Prefer daytime
<input type="checkbox"/> Prefer weekdays	<input type="checkbox"/> Prefer evenings
<input type="checkbox"/> Prefer weekends	<input type="checkbox"/> Other .....

4. Other information

How did you hear about us? (please tick all that apply)

<input type="checkbox"/> Advertisement	<input type="checkbox"/> Word of mouth
<input type="checkbox"/> Volunteer Agency	<input type="checkbox"/> Poster
<input type="checkbox"/> Newspaper Article	<input type="checkbox"/> Member of staff
<input type="checkbox"/> Other .....	

Do you have any health problems or special needs that you feel we should be aware of?

Yes                                       No

if yes, please give details .....

Do you have access to a car you can use for volunteer work, if necessary?

Yes                                       No                                       Occasionally

5. References

Please give details of two referees. These should not include family members. (We will contact your referees without your prior permission).

Name: .....

Relation to Referee .....

Job Title .....

Address .....

..... Phone .....

Name: .....

Relation to Referee .....

Job Title .....

Address .....

..... Phone .....

Thank you for completing this form, please return to  
Maureen Moore, Manager  
St. David's Bradbury Day Centre  
57 St. David's, Newtongrange, EH22 4LF