



Volunteer Application Form

Personal details

Full Name

Address

Home Telephone

Email

Mobile

Contact details

(for use in emergency only)

Application Information

What attracted you to the idea of applying for this position?

Describe your background and any experience and skills you have that would be useful for this role

Availability

Please indicate below the times and days when you are generally available

Monday

am pm

Tuesday

am pm

Wednesday

am pm

Thursday

am pm

Friday

am pm

Are there times when you will be unavailable, e.g. School holidays?
When can you start volunteering?

How long do you think that you will be able to volunteer for?

References

Please give the names and contact details of two people in a professional capacity (not relatives or friends) who know you well and could provide a character reference.

**Referee one
Name**

**Referee two
Name**

Address

Address

Tel.

Tel.

How does this person know you?

How does this person know you?

Rehabilitation of Offenders Act 1974: Do you have any unspent convictions?

Yes No If yes please specify

Please note that a conviction will not exclude you from volunteering with AvMA, but will be taken into account when accessing suitability.

Declaration

I declare that the information I have provided is correct and the best of my knowledge

Signature

Date