

P4: Volunteer Application Form

Thank you for your offer to help with the Ashby Foodbank.
In order for us to process your application please would you answer the following questions:

(If you have any questions about your application or would like help completing it please contact Helen Child at helen@ashbyfoodbank.org.uk or 07542118878)

Your Name: _____

Address: _____

Postcode: _____

Tel No: _____

Date of Birth: _____

Next of Kin:

Name: _____

Tel No: _____

Relationship: _____

Contact in case of emergency (if different from above)

Name: _____

Tel No: _____

Relationship: _____

I would be interested in helping in the following area(s):

Helping in the Food Bank Centre Helping in Warehouse
Maintenance / DIY Assisting in Office

I am available for:

- One off events ie supermarket collections, Harvest food sorting, Christmas box sorting
- 1-4 hours a week day _____ am pm
- Full Day(s) day(s) _____

Do you have any health problems that we should be aware of? Yes No

details:

Please tell us your previous work experience or qualifications:

Are you willing to complete a form for us to submit for a Criminal Records Bureau check?
Yes No

If you have any criminal convictions (except those 'spent' under the Rehabilitation of Offenders Act) please give details:

Please State your reasons for volunteering:

Please give us any information you think may be useful to us

Signature: _____ Date: _____

Please return this form to Helen Child at the Ashby Foodbank

% 1 Trinity Close
Ashby de la Zouch
Email : helen@ashbyfoodbank.org.uk
<http://ashbyfoodbank.org.uk/>

References *please note that neither referee should be a close relative*

Referee 1

Name: _____

Address: _____

Tel No: _____

Referee 2

Name: _____

Address: _____

Tel No: _____