

Thank you for your interest in volunteering for Wakefield Hospice. Please complete all sections of the form including full contact details for your referee. We will be in touch shortly after receiving your reference back to arrange an informal interview.



VOLUNTEER APPLICATION FORM

Mr/Mrs/Miss/Ms (please circle) First name Surname

Date of birth Age Gender

Address

Postcode Home Tel Mobile

Email address (please print clearly)

Are you working at present ? not working retired studying

Who should we contact in case of an emergency?

Name Relationship to you

Address

Home tel.no Mobile

References

Please print clearly the **full name and address of a referee** (not a family member or partner) who have known you for at least 2 years. References should be employment or education related where possible and should refer to your suitability for voluntary work for Wakefield Hospice.

Mr/ Mrs/ Miss/ Ms..... Email :

Postal address

.....

Postcode

How do you know this person?

.....known since.....

Please consider carefully the options below and tick any that may be of interest to you. Role descriptions can be found on our website www.wakefieldhospice.org

At the Hospice			
Patient Support: Hospitality (In-Patient Unit, Dementia Day Care Services, Day Therapy Unit, Bereavement Support)		Patient Support: Nurse* / Health Care Assistant* / Complimentary Therapists*	
Reception / Visitor Hospitality		Chaplain*	
Caretaker / Grounds and Garden Maintenance		Admin / Finance	
Catering / Kitchen		Housekeeping / Laundry	
Raising Funds			
Events & Community Activities		Events Catering	
At the Warehouse			
Donations point		Donations sorter	
Driver's mate		Office	
In WH Retail			
Wakefield Ridings Centre		Wakefield Teall St (Glass, china, vintage)	
Wakefield George St (Furniture & homeware)		eBay Trading (based at George St)	
Ossett		Horbury	
Walton Hub (Hidden Gems Dress Agency)		Walton Hub (Books & Bistro)	
Wakefield City Centre Men and Women's Fashion Shop - Kirkgate		Wakefield City Centre Treacle's Children's shop (clothes and toys) – The Springs	

***(for these roles, relevant experience / qualifications / insurance will need to be checked where applicable)**

How did you hear about volunteering with us?
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<p>Which day(s) / times would you be available to volunteer?</p> <p><input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> All day <input type="checkbox"/> As needed</p> <p>Your name will also be placed on our Fundraising Department's volunteer contact list. Help is needed at a variety of events throughout the year, often at weekends</p> <p>Please tick this box if you do not wish to be contacted about helping at events <input type="checkbox"/></p>
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Are you generally in good health? YES NO

Do you have any medical conditions / additional support needs which may affect your ability to volunteer?

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.....
.....

Please note: All Volunteers will complete an **Induction** as soon as they commence duty and complete **annual update mandatory training** in areas deemed necessary by Wakefield Hospice to safely carry out their role.

INFORMATION QUESTIONNAIRE

Please complete this form to help us understand why you wish to become a volunteer for Wakefield Hospice

We usually recommend waiting 6 -12 months after a significant bereavement before volunteering at Wakefield Hospice. However, this can be reviewed on a case by case basis. With this in mind, we would be grateful if you could let us know of any recent losses or bereavements you have suffered, or if you are a relative or friend of a current Hospice patient:

Have you had any previous contact with Wakefield Hospice?

What is your understanding of our services?

Tell us a little bit more about yourself - your education, work history or voluntary experiences and any leisure activities or hobbies that you enjoy. What can you offer as a volunteer?

What benefits do you hope to gain from volunteering (eg learning new skills, using your experience, friendship etc.)?

REHABILITATION OF OFFENDERS ACT

Certain voluntary positions that are based at the Hospice and involve direct patient contact are exempt from the provisions of Section 4(a) of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975. Applicants for these voluntary positions are, therefore, NOT ENTITLED TO WITHOLD INFORMATION ABOUT CONVICTIONS which for other purposes are spent under the provisions of the Act.

In these cases it is necessary for you to DECLARE WHETHER YOU HAVE ANY SUCH CONVICTIONS. In the event that you are appointed as a Volunteer, any failure to disclose convictions will result in dismissal. If you require further clarification, please do not hesitate to contact the Voluntary Services Department

Have you ever been convicted of a criminal offence or received a caution, reprimand or warning?

YES NO Signature..... Print name.....

For all other voluntary positions, we ask that you disclose whether you have any UNSPENT criminal convictions

YES NO Signature.....Print name.....

DECLARATION

Given the nature of the voluntary role for which I have applied, I understand that it may be necessary to apply for a Standard or Enhanced Disclosure Certificate from the Disclosure and Barring Service. (More information about disclosure is available at www.disclosure.gov.uk). This will include details of cautions, reprimands or final warnings, as well as convictions.

I declare that the information given in this form is complete and accurate. I understand that any false information or deliberate omissions will disqualify me from voluntary opportunities. I understand these details will be held in confidence by the Hospice, for the purposes of assessing this application, and ongoing personnel administration in compliance with the General Data Protection Regulations 2018.

Signature:	Date:
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**Please return this form to:
Volunteer Services Office, Wakefield Hospice, Aberford Road, Wakefield WF1 4TS or
any Wakefield Hospice charity shop, in a sealed envelope marked 'Volunteer Services' or
email it to: vs@wakefieldhospice.co.uk**

**We will be in touch shortly regarding this application –
Thank you for your interest in supporting us**

WAKEFIELD HOSPICE VOLUNTEER EQUAL OPPORTUNITIES MONITORING FORM

Wakefield Hospice believes that no present or future volunteer should receive less favourable treatment, either directly or indirectly, on the grounds of gender, race, marital status, disability, religion, age, nationality, ethnicity or national origin, social background or sexual orientation. No candidate or prospective volunteer should be disadvantaged by any conditions or requirements which cannot be shown to be justified. This information will only be used by Wakefield Hospice for statistical and monitoring purposes and will not be passed on. It will be treated with the utmost confidentiality in line with the requirements of Data Protection legislation. These details are not taken into account in assessing your application for a volunteer role at Wakefield Hospice.

ETHNICITY

Ethnic group describes how you see yourself in terms of your culture. It is not the same as nationality, place of birth or citizenship.

Please tick one box only:

- WHITE - UK
- WHITE – OTHER (please describe)
- BLACK – UK
- BLACK- OTHER (please describe).....
- ASIAN (please describe)
- OTHER (please describe)
- PREFER NOT TO SAY

DISABILITY

Do you consider yourself disabled within the meaning of the Disability Discrimination Act 1995?

- Yes No Prefer not to say

Any information you provide is used for monitoring purposes only. If you need a 'reasonable adjustment' to help you in your volunteer role then please contact us and we will take reasonable steps to meet your needs.

GENDER

- Male Female Other Prefer not to say

AGE

- 14- 16 16-18 19-25 26-35 36-45 46-55 56-65 Over 66
 Prefer not to say

HOW DID YOU FIND OUT ABOUT VOLUNTEERING WITH WAKEFIELD HOSPICE?

- | | | |
|---|---|---|
| <input type="checkbox"/> Poster / advertisement | <input type="checkbox"/> From another volunteer | <input type="checkbox"/> Word of mouth |
| <input type="checkbox"/> Contact with the Hospice | <input type="checkbox"/> Volunteer agency | <input type="checkbox"/> Jobcentre / employment agency |
| <input type="checkbox"/> Fundraising event | <input type="checkbox"/> Website | <input type="checkbox"/> Recruitment Fair / Information event |
- Other.....

Thank you for completing this form