** VOLUNTEER APPLICATION FORM**

Please complete this application form electronically where possible, or in black ink using block capitals

**Personal Details**

|  |  |
| --- | --- |
| Title (Mr, Mrs, Miss, Ms or other) |  |
| Surname |  |
| Forenames |  |
| National Insurance No. |  |
| AddressPostcode |  |
| Email address |  |
| Home Phone Number |  |
| Mobile Phone Number |  |

**Application Questions**

Please answer the questions below to tell us a little more about yourself and why you want to volunteer with Wiltshire Health and Care (WHC)

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| --- |
| Why do you want to join the Volunteer Service with WHC? |
|  |
| Have you ever worked for this organisation as an employee or in any other healthcare setting? If so, please give details  |
|  |
| Tell us a little about your current circumstances; employed, retired, other or any relevant employment history. If in education, which school and year group |
|  |
| What skills and experience do you have that you can bring to Wiltshire Health and Care Volunteer Service? |
|  |
| Have you done any voluntary work before? If so, what did you do and where?*In any National Citizenship Service activities, voluntary projects at school or charity organisations?* |
|  |
| Having read the Volunteer Opportunities, what type of voluntary work would you like to help us with? (ward based patient facing, trolley shop, administration or gardening) |
|  |
| Is there anything else you would like to add about yourself? |
|  |

**Work Preferences**

Please indicate to us which area you are interested in, along with your approximate availability:

|  |
| --- |
| **Location *(please tick)*** |
| Chippenham |  | Devizes (Admin Only) |  | Melksham (Admin Only) |  |
| Savernake |  | Trowbridge (Admin Only) |  | Warminster |  |
| Are you able to travel? – (reimbursement for fuel, public transport can be claimed) |
| **Hours *(please circle your availability)*** |
| Monday | AM PM | Tuesday | AM PM | Wednesday | AM PM |
| Thursday | AM PM | Friday | AM PM | Saturday | AM PM |
| Sunday | AM PM |  |  |  |  |
| Other, please specify preferences (for example lunchtimes, evenings, weekends): |

**References**

Please give details of two referees who have known you for at least one year. They should not be directly related to you, and a ‘person of standing’. **For students only one referee should be a tutor or member of college staff**.

|  |  |
| --- | --- |
| 1. Title
 |  |
| Surname |  |
| Forenames |  |
| Occupation |  |
| Relationship to you |  |
| How long have you known this person? |  |
| Email address |  |
| Phone Number |  |
| AddressPostcode |  |
| 1. Title
 |  |
| Surname |  |
| Forenames |  |
| Occupation |  |
| Relationship to you |  |
| How long have you known this person? |  |
| Email address |  |
| Phone Number |  |
| AddressPostcode |  |

**Declaration**

* The information in this form is true and complete. I agree that any deliberate omission, falsification or misrepresentation in the application form will be grounds for rejecting this application or subsequent termination of registration with the volunteer services
* I understand that prior to commencing voluntary work, the organisation are required to undertake pre-employment checks which include routine medical screening and immunity testing where necessary and a Disclosure & Barring Service check dependent upon role
* I give my permission for my details to be held on the organisation’s Electronic Staff Record system and in an individual personnel file. I understand that only authorised persons have access to these details and that I can request to see my personal file in line with Data Protection Legislation.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IF YOU ARE UNDER 18** please ask your parent/guardian to complete the Consent below.

I give permission for my son/daughter to do voluntary work for Wiltshire Health and Care.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Monitoring Information**

NHS organisations recognise the benefits of having a diverse workforce and therefore welcome applications from all sections of the community. In addition to this, under the provisions of the Equality Act 2010, all NHS organisations are required to demonstrate that their recruitment processes are fair and that they are not discriminating against or disadvantaging anyone because of their age, disability, gender reassignment status, marriage or civil partnership status, pregnancy or maternity, race, religion or belief, sex or sexual orientation. Therefore, a series of questions need to be raised in order to ascertain who is applying for each position and to ensure that no one is being unfairly discriminated against or disadvantaged.

This section of the application form will be detached from your application and will not be used as part of the selection process. The information collected is only used for monitoring purposes in an anonymised format to assist the organisation in analysing the profile and make up of individuals who apply, are shortlisted for, and appointed to each vacancy. In this way, they can check that they are complying with the Equality Act 2010.

**Equality Act 2010**

The Equality Act 2010 protects people against discrimination on the grounds of their age and sex.

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| --- | --- | --- |
| \* Please state your date of birth |  / / | Age: |
| \* Please indicate your gender | 🞎 Male 🞎 Female 🞎 I do not wish to disclose this  |

The Equality Act 2010 protects people who are married or in a civil partnership.

|  |
| --- |
| \* Please indicate the option which best describes your marital status |
| 🞎 Married🞎 Single🞎 Civil partnership🞎 Legally separated | 🞎 Divorced🞎 Widowed🞎 I do not wish to disclose this |

The Equality Act 2010 protects bisexual, gay, heterosexual and lesbian people from discrimination on the grounds of their sexual orientation.

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| --- |
| \* Please indicate the option which best describes your sexual orientation |
| 🞎 Lesbian🞎 Gay🞎 Bisexual | 🞎 Heterosexual🞎 I do not wish to disclose this |

The Equality Act 2010 protects people against discrimination on the grounds of their race which includes colour, nationality, ethnic or national origin.

|  |
| --- |
| \* Please indicate your ethnic origin |
| **Asian or Asian British**🞎 Bangladeshi 🞎 Indian🞎 Pakistani🞎 Any other Asian background**Black or Black British**🞎 African🞎 Caribbean🞎 Any other Black background | **Mixed**🞎 White & Asian🞎 White & Black African🞎 White & Black Caribbean🞎 Any other mixed background**White**🞎 British 🞎 Irish🞎 Any other White background | **Other Ethnic Group**🞎 Chinese🞎 Any other ethnic group🞎 I do not wish to disclose this  |

The Equality Act 2010 protects people against discrimination on the grounds of their religion or belief, including a lack of any belief.

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| \* Please indicate your religion or belief |
| 🞎 Atheism🞎 Buddhism 🞎 Christianity 🞎 Hinduism | 🞎 Islam🞎 Jainism🞎 Judaism🞎 Sikhism | 🞎 Other 🞎 I do not wish to disclose this |

The Equality Act 2010 protects disabled people - including those with long term health conditions, learning disabilities and so called "hidden" disabilities such as dyslexia. If you tell us that you have a disability we can make reasonable adjustments to ensure that any selection processes - including the interview - are fair and equitable.

|  |  |
| --- | --- |
|  \* Do you consider yourself to have a disability? | 🞎 Yes 🞎 No🞎 I do not wish to disclose this information |
| Please state the type of impairment which applies to you. People may experience more than one type of impairment, in which case you may indicate more than one. If none of the categories apply, please mark ‘other’. |
| 🞎 Physical impairment 🞎 Learning Disability/Difficulty 🞎 Sensory impairment 🞎 Long-standing illness 🞎 Mental health condition 🞎 Other  |
| If you have a disability, do you wish to be considered under the guaranteed interview scheme if you meet the minimum criteria as specified in the person specification? |
| 🞎 Yes 🞎 No |

**Rehabilitation of Offenders Act 1974**

The Rehabilitation of Offenders Act 1974 (as amended) helps rehabilitated ex-offenders back into work by allowing them not to declare criminal convictions after the rehabilitation period set by the Court has elapsed and the convictions become 'spent'. During the rehabilitation period, convictions are referred to as 'unspent' convictions and must be declared to employers.

The organisation aims to promote equality of opportunity and is committed to treating all applicants for positions fairly and on merit regardless of ethnicity, disability, age, gender or gender re-assignment, religion or belief, sexual orientation, pregnancy or maternity and marriage or civil partnership. The organisation undertakes not to discriminate unfairly against applicants on the basis of a criminal conviction or other information declared.

You are required to declare all current ‘unspent’ criminal convictions or cautions (including reprimands and final warnings). You are not required to disclose convictions or cautions which have become ‘spent’.

As part of assessing your application, organisations will only take into account relevant criminal record and other information declared which is relevant to the position being applied for.

Answering ‘yes’ to the question below will not necessarily bar you from appointment. This will depend on the relevance of the information you provide in respect of the nature of the position for which you are applying and the particular circumstances.

|  |
| --- |
| \*Are you currently bound over or do you have any current ‘UNSPENT’ convictions, cautions, reprimands or final warnings that have been issued by a Court or Court-Martial in the United Kingdom or in any other country? |
| 🞎 Yes 🞎 No  |
| If you have answered ‘yes’ above, you must answer this question: |
| Please include details of the order binding you over and/or the nature of the offence, penalty, sentence or order of the Court, and the date and place of the Court hearing. You **are not** required to disclose information about any convictions, cautions, reprimands or final warnings which are ‘SPENT’ (old) under the Rehabilitation of Offenders Act 1974. **It is important that you understand the changes that came into effect from March 2014 under the Legal Aid, Sentencing and Punishment of Offenders Act which makes amendments to the length of time before certain sentences become spent (in England and Wales only).**You **are not** required to tell us about parking offences.Please include any additional information or comments that you believe to be relevant. |
|  |

**Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2013**

The position you have applied for has been identified as being an 'eligible position' under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended)**[the Exceptions Order]** and, in certain circumstances,the Police Act 1997*.* This means that when considering any such appointment, the employing organisation is permitted to request a standard or enhanced disclosure through the Disclosure and Barring Service (known as a DBS check).

Both standard and enhanced DBS disclosures contain information about any convictions, cautions, reprimands and final warnings that are not protected (i.e. filtered) as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2013.

Before you complete this form, it will be important for you to read the highlighted note in the section below.

Enhanced disclosures may also include other relevant police information where this is deemed relevant to the position you are applying for.

**Please note that from 29 May 2013, a number of significant changes were introduced under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2013 (S.I. 2013/1198) which means that certain spent (old) or minor convictions and cautions are now protected (i.e. filtered) when specific conditions are met.**

**Any such convictions and cautions will no longer be included in any request for a standard or enhanced DBS check and you are no longer required to declare this information as part of a self-disclosure request or when completing a job application.**

**If you have a criminal record and are unsure about what might be revealed about you as part of a DBS check, or the type of information you should consider declaring when completing this form, the following links to guidance will help provide more clarity:**

**The simple guide to filtering (Unlock) at:** <http://hub.unlock.org.uk/knowledgebase/filtering-simple-guide/>

**Practical guidance on the DBS filtering rules (NACRO) at:** [www.nacro.org.uk/resettlement-advice-service/support-for-individuals/](http://www.nacro.org.uk/resettlement-advice-service/support-for-individuals/)

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| --- |
| \* Are you currently bound over, or do you have any convictions, cautions, reprimands or final warnings that would not be protected (i.e. filtered) as defined by the Exceptions Order 2013 - that have been issued by a Court or Court-Martial in the United Kingdom or in any other country? |
| 🞎 Yes 🞎 No  |
| If you have answered ‘yes’ above, you must answer this question: |
| Please provide details of the order binding you over and/or the nature of the offence, penalty, sentence or order of the Court, the date and place of the Court hearing. **It is important for you to understand which convictions or cautions are now protected (or filtered) under an amendment to the Exceptions Order to the Rehabilitation of Offenders Act (as amended in England and Wales) which came into force from 29 May 2013.** You **are not** required to tell us about parking offences. Please include any additional information or comments that you believe to be relevant. |
|  |
| \* Are you currently bound by any barring decision made by the Disclosure Barring Service (DBS) from working with children? |
| 🞎 Yes 🞎 No  |
| \* Are you currently bound by any barring decision made by the Disclosure Barring Service (DBS) from working with adults? |
| 🞎 Yes 🞎 No  |

**Relationships**

|  |
| --- |
|  If you are related to a director, or have a relationship with a director or employee of an appointing organisation, please state the relationship: |
|  |



Updated 24.08.22