**Bath & North East Somerset Council**

Volunteer Application Form

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| --- | --- |
| Volunteering Activity: |  |
| Type of role: | Longer term volunteering: yes / no |
| Service area: |  |

**Personal Details and Contact Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title: Surname: Forenames (in full): | | | | |
| Please also provide details of any former names (if applicable) i.e. Maiden Name:- | | | | |
| Address: |  | | Daytime Telephone No: |  |
|  | | | Evening Telephone No: |  |
| Mobile No: |  |
| National Insurance No: |  |
| Post Code: | |  | e-mail: |  |

**Verification of Identify**

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| --- |
| **1 document providing photographic ID and 2 documents providing address confirmation** |

**References** Please provide details of two referees who can comment on your suitability for this volunteering activity.

|  |  |  |  |
| --- | --- | --- | --- |
| **Referee 1** | | **Referee 2** | |
| Name: | | Name: | |
| Relationship to applicant: | | Relationship to applicant: | |
| Position: | | Position: | |
| Employer/University/College Name: | | Employer/University/College Name: | |
| Address: | | Address: | |
| Post Code: |  | Post Code: |  |
| Telephone No: |  | Telephone No: |  |
| E-mail: |  | E-mail: |  |

1. **Volunteering Commitment (you do not need to complete this section for a one off event)**

|  |  |
| --- | --- |
| How long will you be available for?  (eg: 6 months, term time only etc) |  |
| Which days and times would you like to volunteer for?  (subject to agreement) |  |
| Do you have any health problems or disabilities which you would like us to take into account? |  |

1. **Please tell us about your employment history and any voluntary or work experience you have:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name and address of organisation | Job, volunteering role or relevant work experience | Please indicate whether the role was voluntary (VR) or paid (PR) | Start Date (dd/mm/yyyy) | End Date (dd/mm/yyyy) |
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1. **Please list any qualifications and training whether work related or not, which might be useful.**

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| --- | --- | --- | --- | --- | --- |
| Qualifications | Level | Subjects | Grade/  Result | | Year  Obtained |
|  |  |  |  | |  |
| Title and brief description of any formal training / courses | | | | Date | | |
|  | | | |  | | |
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1. **Membership of Professional Associations – if relevant to volunteering activity:**

|  |  |
| --- | --- |
| Organisation Name | Level of Membership/Role/Registration No. (if applicable) |
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|  |  |
|  |  |

**Please briefly outline: What particularly interests you about the service area and / or reasons for applying for this volunteering activity?**

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**Additional Information (Note - this is not relevant for all volunteering opportunities)**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Are you licensed to drive any of the following? | Private Car |  | Motor Bike |  | PCV |  | Other (give details) |  |

**Convictions/Disqualifications**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The Council is committed to making appointments on merit and will focus on a person’s abilities, skills and experience. When considering any criminal convictions the Council will consider the relevance of the conviction(s) to the job. A criminal record will not necessarily be a bar to obtaining a position. Under the Rehabilitation of Offenders Act 1974, a conviction will become spent after a set period of time – see guidance notes for details.  **If you are working with vulnerable adults, children and young people the post is exempt under the Act and you are required to give details of all convictions, cautions including spent convictions** (see blue section of this form).  Do you have any convictions (including driving offences), cautions, bindovers or disqualifications?   |  |  |  |  |  | | --- | --- | --- | --- | --- | | YES\* |  | NO |  | (tick whichever is appropriate) |   \****If yes, please give details on a separate sheet and attach it to this form in a sealed envelope marked Confidential Disclosure*** |

**THE NEXT SECTION OF THIS FORM APPLIES TO EXEMPTED POSTS I.E. THOSE POSTS WHERE THE VOLUNTEERING ACTIVITY INVOLVES REGULAR AND UNSUPERVISED ACCESS TO VULNERABLE ADULTS, CHILDREN AND YOUNG PEOPLE AND CERTAIN OTHER POSTS THAT REQUIRE DISCLOSURE AND BARRING CLEARANCE (DBS)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A) Enhanced DBS Check:**  Have you ever been convicted of any offence, been bound-over, or given a caution?   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Yes\* |  | No |  | (tick whichever is appropriate) |   Do you have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974?   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Yes\* |  | No |  | (tick whichever is appropriate) |   Do you have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020?   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Yes\* |  | No |  | (tick whichever is appropriate) |   ***\*if yes, please give detail on a separate sheet and attach it to this form in a sealed envelope marked Confidential Disclosure.***  This post is subject to an Enhanced DBS check so that any criminal background (including “spent” convictions, bind-over orders or cautions) is disclosed to the Council. Bath and North East Somerset Council cannot employ someone to this post without this check. If you are successful in applying for this post we will ask the DBS for a Disclosure.  The position for which you are applying involves contact with vulnerable groups. It is exempt from the Rehabilitation of Offenders Act 1974 and all subsequent amendments (England and Wales). For this position you are not entitled to withhold information about police cautions, bind-overs, or any criminal convictions that would otherwise have been considered “spent” under the Act.  The amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) provides that when applying for certain jobs and activities, certain convictions and cautions are considered ‘protected’. This means that they do not need to be disclosed to employers, and if they are disclosed, employers cannot take them into account.  Guidance about whether a conviction or caution should be disclosed can be found on the Ministry of Justice website: <https://www.gov.uk/government/publications/dbs-filtering-guidance/dbs-filtering-guide> |
| **B) Safeguarding Declaration**:  I declare that the information I have given on this form is complete and accurate and that:   * I am not barred or disqualified from working with vulnerable groups, children or young people * I am not subject to any sanctions or conditions on my employment imposed by the Independent Safeguarding Authority, Secretary of State or other regulatory body.   Signed: Print Name:  Date: |

**General Declaration**

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| --- | --- |
| I understand that to knowingly give false information or to leave out any relevant information could result the volunteering being withdrawn.  Signed: Print Name:  Date: | |
| **PLEASE RETURN THIS FORM TO** **THE MANAGER RESPONSIBLE FOR THE VOLUNTEERING ACTIVITY** |
| **Data Protection?**  Data Protection in accordance with the Data Protection Act 2018, the Council will only use the information given on this application form to determine your suitability for this role and to monitor equal opportunities. We will keep application forms of unsuccessful candidates for six months before being destroyed.  However, as the Council has a duty to protect public funds, we may use the information you have provided on this form to prevent and detect fraud, especially in relation to benefits, Council Tax, Business Rates, Housing/Rents, salaries, employment, pensions and Councillors’ Allowances.  **How we use your data**  Please delete accordingly:  I do/do not agree to my contact details being kept on a secure database and being used to contact me in the future about other volunteering opportunities and updates associated with the Bath and North East Somerset Council SEND Partnership Service. I will inform the Send Partnership Service if I wish my details to be removed from use in the future.  Signed: Print Name:  Date: |

Please return completed form to [SEND\_PartnershipService@bathnes.gov.uk](mailto:SEND_PartnershipService@bathnes.gov.uk)

Or if necessary by post, to SEND Partnership Service, Bath and North East Somerset Council, Lewis House, Manvers Street, Bath, BA1 1JG

**Equal Opportunities Monitoring Form**

All volunteers are asked to complete the Equal Opportunities Monitoring Form overleaf.

***Please note – this sheet will only be used it to help us monitor equal opportunities.***

**Why are we monitoring?**

The Council has adopted procedures which are intended to ensure that equality of opportunity exists for all volunteers and that these are offered on merit.

Monitoring is an essential part of tackling inequality and discrimination and, if done effectively, will help us check whether our policies, services and organisation culture support our aims as an equal opportunities employer.

Equality monitoring is the process of gathering and analysing data on the equality strands. The Equal Opportunities Monitoring Form will ask for information on your age, sex, ethnic origin/nationality, sexual orientation, religion and disability.

**EQUAL OPPORTUNITIES MONITORING FORM - IS SECTION TO BE COMPLETED BY ALL VOLUNTEERS (this form will not be used as part of any selection process)**

Please help Bath & North East Somerset Council monitor its equalities policy and prevent unfair discrimination by answering ALL of the following questions and ticking the appropriate box. This information will be treated in the strictest confidence and only used to enable us to monitor our performance as an equal opportunities employer. It will not be seen or used by anyone involved in selecting candidates for interview.

**Personal Details:**

|  |  |  |
| --- | --- | --- |
| Volunteering Post |  | |
| First name(s): | Surname: | |
| Date of Birth: | Male: | Female: |
| **Ethnic Origin/Nationality:** **My Ethnic Origin is:**  See Category Number.  Please quote a number from the list given below   |  |  |  | | --- | --- | --- | | **White** | **Mixed** | **Asian** | | 01 British | 21 Black and White Caribbean | 41 Indian or British Indian | | 02 Irish | 22 Black and White African | 42 Pakistani, British Pakistani | | 19 Other white | 27 Chinese and White | 43 Bangladeshi, British Bangladeshi | |  | 28 Any other mixed background | 44 Other Asian, British Asian | |  |  |  | | **Black** | **Other** |  | | 61 Caribbean | 81 Chinese | 99 Prefer not to say | | 62 African | 85 Any Other |  | | 63 Other Black or Black British | |  | |  | |  | | | |
| **Sexual Orientation:**  Bisexual Gay Heterosexual Lesbian Prefer not to say | | |
| **Religion** (please tick one box only; categories determined by Office of Population Census and Surveys):  Christian Buddhist Hindu Jewish Muslim  Sikh All other religions, beliefs or faiths No religion Prefer not to say | | |
| **Disability:**  The Disability Discrimination Act defines disability as a physical or mental impairment which has a substantial and long term adverse effect on his/her ability to carry out normal day to day activities.  Do you consider yourself to be disabled? Yes No  If Yes what is the nature of your disability?    If you are disabled, are there any arrangements we can make for you at interview (e.g. ground floor venue, hearing loop, sign language interpreter, audio tape or other adjustments). Please detail requirements:  dg_178379.gif  Please sign here if you are happy for your details to be passed to the interviewing manager so that you can be considered under the two ticks scheme.    Signature Print name in full | | |
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