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##### Volunteer Application Form

|  |  |
| --- | --- |
| First Name(s) | Surname(s) |
|  |  |

|  |  |
| --- | --- |
| Address and post code | |
|  | |
| Date of Birth |  |

|  |  |
| --- | --- |
| Phone Number | E-mail Address |
|  |  |

|  |  |
| --- | --- |
| Emergency contact name |  |
| Emergency contact details | Tel:  E-mail: |

**When are you able to volunteer? (Please tick)**

|  |  |  |
| --- | --- | --- |
|  | **Morning 09:45-13:00** | **Afternoon**  **12:45-16:15** |
| **Monday** |  |  |
| **Tuesday** |  |  |
| **Wednesday** |  |  |
| **Thursday** |  |  |

|  |
| --- |
| 1. What relevant skills, interests or experiences do you have?  e.g. Working with people, using computers, problem solving, volunteering or paid work, knowledge of asylum process, experience working with people seeking sanctuary |
|  |
| 2.What are you hoping to gain from volunteering?  e.g. getting new skills to get a job, meeting new people, building confidence etc. |
|  |
| 3. Which volunteer role(s) are you interested applying for (if known) |
|  |
| 4. Do you speak any additional languages (please specify) |
|  |
| 5. Is there anything else you want us to be aware of? E.g. health conditions (please specify) |
|  |

**3. References**: please give the names and addresses of two people who can provide a character reference for you. One should preferably be a manager or colleague from your current or most recent paid or voluntary work. The other may be a friend or neighbour who knows you well or someone who works with you e.g. a teacher, key worker, support or social worker.

**Wherever possible please include an email address for referees.**

|  |  |  |
| --- | --- | --- |
| Referee 1 |  | Referee 2 |
|  |  |  |
| Name |  | Name |
| Address  Post code |  | Address  Post code |
| Telephone |  | Telephone |
| E-mail |  | E-mail |
| How do you know this person? |  | How do you know this person? |

**If you If you find it difficult to provide two referees, or have any questions please email:** [alexi.dimond@sheffield.cityofsanctuary.org](mailto:alexi.dimond@sheffield.cityofsanctuary.org); **text or WhatsApp:** 07494036559

All volunteers will be required to attend an induction and will be sent an induction pack. On completing the induction all volunteers agree to abide by our code of conduct.

I have read and fully understood the information above and I give my consent for Volunteer Centre Sheffield (VCS) and City of Sanctuary Sheffield (CoSS) to hold personal information about me and, when appropriate, for staff/volunteers to share that information with other organisations or agencies.

|  |  |  |
| --- | --- | --- |
| Name | Signature | Date |
|  |  |  |

**Please return this form by email to**: [michele@sheffield.cityofsanctuary.org](mailto:michele@sheffield.cityofsanctuary.org) or post to **The Sanctuary, 37 – 39 Chapel Walk, Sheffield, S1 2PD**

VCS and CoSS need to keep records of our service users to provide an effective service. These contain personal information such as your name, age, address, telephone number etc.

All personal information is treated as private and confidential by all staff and volunteers at VCS and

CoSS. It is kept on our database and/or in a paper filing system.

We will not share your personal information with other agencies without your permission.



**Equality and Diversity Monitoring Form**

CoSS is committed to being an organisation that reflects the diverse communities that we serve. To help do this it is vital that we monitor and analyse diversity information so that we can ensure that all our processes are fair and transparent and in line with the Equalities Act 2010.

Any information provided on this form will be treated as strictly confidential and will be used for statistical purposes only, in accordance with our data protection policy. No information will be published or used in any way which allows any individual to be identified.

To meet this commitment CoSS needs your help; but filling in this form is not compulsory.

Please return the completed form to: [michele@sheffield.cityofsanctuary.org](mailto:michele@sheffield.cityofsanctuary.org)

1. **Role**

Please tick the role or roles that apply to you:

Volunteer  Staff  Trustee  Other 

1. **Experience**

Please tick all that apply:

Do you have lived experience of seeking sanctuary? Yes / No

Do you have lived experience of migration to the UK? Yes / No

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1. **Gender**

Man  Woman  Intersex  Non-binary  Prefer not to say 

If you prefer to use your own term, please specify here ……………………………………….

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1. **Age**

16-24  25-29  30-34  35-39  40-44  45-49 

50-54  55-59  60-64  65+  Prefer not to say 

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1. **What is your ethnicity?**

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box:

***White***

English  Welsh  Scottish  Northern Irish  Irish  British 

Gypsy or Irish Traveller  Prefer not to say 

Any other white background, please write in: …………………………………..

***Mixed/multiple ethnic groups***

White and Black Caribbean  White and Black African  White and Asian 

Prefer not to say 

Any other mixed background, please write in: ………………………………….

***Asian/Asian British***

Indian  Pakistani  Bangladeshi  Chinese  Prefer not to say 

Any other Asian background, please write in: ……………………………….

***Black/ African/ Caribbean/ Black British***

African  Caribbean  Prefer not to say 

Any other Black/African/Caribbean background, please write in: ……………………………..

***Other ethnic group***

Arab  Prefer not to say  Any other ethnic group, please write in: ……………………….

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1. **Do you consider yourself to have a disability or health condition?**

Yes No  Prefer not to say 

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1. **What is your sexual orientation?**

Heterosexual  Gay  Lesbian  Bisexual  Prefer not to say 

If you prefer to use your own term, please specify here ……………………………………………….….

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1. **What is your religion or belief?**

No religion or belief  Buddhist  Christian  Hindu  Jewish 

Muslim  Sikh  Humanist  Prefer not to say 

If other religion or belief, please write in: …………………………………………………….

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