 **Volunteer Application Form**

***Please email completed form back to enquiries@parcaltd.org.***

**Personal details**

Full name

Address

(Including Postcode)

Contact name

(For use in emergency only)

Phone number

Contact phone number

Email

**Application information**

Varies

In what capacity do you know this referee?

If you have worked either in voluntary or paid work in the past year, one reference should be obtained from your last employer or give the names of people who know you well.

Referee

Name

Address

Email

**References**

Thurs

am pm

Sat

am pm

Fri

am pm

Mon

am pm

Tues

am pm

Weds

am pm

Your availability

(Please ‘X’ as appropriate)

Position applied for

Information to support your application

Experience, learning and skills

Can you speak, read or write any other languages besides English?

**Rehabilitation of Offenders Act 1974:** Do you have any unspent convictions?

If yes, please specify

*Please note that a conviction will not necessarily exclude you from volunteering with PARCA,  
but will be considered when assessing your suitability.*

yes no

**Equal Opportunities Monitoring**

***The information in this section is used only for the purposes of ensuring the effectiveness of our Equal Opportunities Policy, which is available on request.***

How would you describe yourself?

**Asian or Asian British:** **Black or Black British:**

Indian Black Caribbean

Pakistani Black African

Bangladeshi Any other Black background

Any other Asian background (Please specify)

(Please specify)

**Mixed:**

**White:**

White British **Chinese or other ethnic group**:

White Irish Chinese

Any other white background Any other Ethnic background

(Please specify) (please specify)

Yes No

Do you consider yourself to have a disability/impairment?

If yes, please specify

*These categories of ethnic origin are recommended by the Commission for Racial Equality as the most appropriate for monitoring the UK. We recognise that the specific categories may not be appropriate for everyone.*

Gender

F M

Age group

<20 21-30 31-50 51-60 61-70 71+

If yes, do you have any particular needs in relation your disability/impairment? Please discuss these with the Manager.

Yes No

What is your nationality?

**Other:**

Yes No

**Consent**

Please tick here if you consent to PARCA taking and using photographs/recordings of

you for promotional use on our website, social media and other platforms.

**Declaration**

I understand that any offer of volunteering with PARCA is subject to satisfactory references, and binding in honour only.

*In accordance with the 1998 Data Protection Act, I agree that PARCA may hold and use personal information about me for volunteering reasons and to keep in touch with me. This information, including that contained in this form can be stored on both manual or computer files. It will be held securely and only accessed by authorised personnel.*

Date

Signature