

# Volunteer Application Form

## Personal Details

First Name: ..... Surname: .....

Address: ..... Postcode: .....

Telephone number: .....

Email address: .....

Male or Female: ..... Occupation: .....

Circle as relevant

Please confirm whether you are willing to be or help with:

- A group befriender ie part of Beauty for Ashes small group: Yes \ No
- An individual befriender ie providing one to one support to residents: Yes \ No
- An individual trained mentor: Yes \ No
- Administration: Yes \ No
- House maintenance: Yes \ No
- Cleaning: Yes \ No

What experience do you have of the following:

We recognise that personal experience can offer a depth of understanding of the needs and aspirations of those with complex needs. Please circle if you have any experience of the following:

| <u>Homelessness</u>   | <u>Substance Misuse</u> | <u>Offending / criminal justice</u> | <u>Mental Health Services /Disability</u> |
|-----------------------|-------------------------|-------------------------------------|---|
| As a client           | As a client             | As a client                         | As a client                               |
| As a volunteer        | As a volunteer          | As a volunteer                      | As a volunteer                            |
| As a worker           | As a worker             | As a worker                         | As a worker                               |
| Via relevant training | Via relevant training   | Via relevant training               | Via relevant training                     |

Please explain why you would like to become a Volunteer or help in other ways:

.....  
.....  
.....  
.....

Please provide your current skills/gifts or qualities, relevant work, voluntary or life experience that you consider relevant to the role:

.....  
.....  
.....  
.....

Please confirm that you are willing to undertake the following for the role:

DBS check Yes \ No

Training Yes \ No

Have you been convicted of any offence and are you willing to discuss this with a Renova Trustee Yes \ No

What times of day\days of the week are you available and how many hours a week would you be able to commit to?

.....

How many months can you make this commitment for (please tick)

- 6 months
- 9 months
- 12 months
- More than 12 months

**References**

Please provide the full details of two people who can provide you with a reference (who are not related to you). These may be former employers, places where you have volunteered (including your church), or people who know you in a professional capacity

Please complete in full

Reference 1: (name, address, email, phone & your relationship)

.....  
.....  
.....  
.....

Reference 2: (name, address, email, phone & your relationship)

.....  
.....  
.....  
.....

I give permission to Renova Trust to obtain references from the above two persons and I confirm the details provided above are true:

Applicant's signature: ..... Date: .....

**Return completed form to [info@renova.org.uk](mailto:info@renova.org.uk)**