

Volunteer Application Form

Please email your completed volunteer application form to:
volunteering@solacewomensaid.org

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Please complete all sections of the application form.

At Solace we are committed to creating a diverse and inclusive environment for our volunteers. The Service Users we support come from all backgrounds and we want to reflect that in our volunteering team.

We are happy to consider any adjustments you might need to support you in your role or in completing this application form. If you would like to discuss this further with the volunteer team, please contact us at volunteering@solacewomensaid.org. This will not affect your application.

Personal Information

Volunteer Position (Please state clearly which role you are applying for)	
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First Name (s)		Title	
Last Name			
Previously used name(s)			
Address			
Telephone Number(s)	Home		
	Mobile		
	Work		
Email			

Present Employment or Volunteer Work Experience

(Please give details of your present or last position)

Employer/Organisation	
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Address		From: (month, year)	
		To: (month, year)	
Telephone Number(s)	Home		
	Mobile		
	Work		
Email			
Summary of key responsibilities:			

Skills & Availability

Languages

Other than English, please state any other languages you speak

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Availability

Please mark with times/days of the week you would be available

	Mon	Tues	Wed	Thurs	Fri
Morning					
Afternoon					

If applying for STAFF COUNSELLOR or COUNSELLOR ROLE
Total Clinical Hours Accrued

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Specific Skills, Training, Qualifications Related to Role

Personal Statement

Please explain why you might be suitable for the Volunteer Role and why you would like to volunteer with us. We are looking for knowledge and experience as outlined in the Volunteer Role Description, any relevant work experience (paid or unpaid), knowledge and personal qualities that would be applicable to this specific Volunteer role.

Continue on a separate sheet if necessary. No more than TWO SHEETS will be considered.

References

References will be taken up once an offer for a volunteer role has been made and verbally accepted. Please give TWO referees, one primary and one reserve, in case we are unable to get hold of your primary referee. Please indicate in what capacity they are known to you. Your reference should be from **EITHER** a professional (previous job or voluntary work) **OR** from education i.e. school, college etc. **Please do not use friends, family friends or family members**

All references will be requested by email so please ensure you have stated the correct email address

Primary Referee

Name	
Post/Role	
Relationship to applicant	
Organisation	
Address	
Email Address	
Telephone Number	

Reserve Referee

Name	
Post/Role	
Relationship to applicant	
Organisation	
Address	

Email Address	
Telephone Number	

Recruitment Monitoring

Have you had any criminal conviction? Spent, Unspent or Pending	Yes/No
Do you need a permit to work in the UK?	Yes/No
Disability We are committed to supporting all potential volunteers who have a disability.	
Do you have a Disability?	
Do you need any adaptations to attend for interviews or to carry out the work described in the Volunteer Role Description?	
Declaration of Interest	
Are you related to an employee of Solace Women's Aid?	
Are you a current volunteer with Solace Women's Aid?	
Where did you hear about this position	

I certify that, to the best of my belief, the information I have provided is true and I understand that any false information or failure to disclose criminal convictions will result, in the event of employment, in disciplinary investigation and is likely to result in dismissal.	Signed:
	Date:
I hereby give consent for personal information (including recruitment monitoring data) provided as part of the application to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the Data Protection Act.	Signed:
	Date: