Volunteer Application Form

Thank you for showing an interest in QAC.

All QAC Volunteers will be trained and supported by us. Communication support for your volunteer role will be provided when needed. We will make sure that we meet your volunteering needs and that QAC policies and procedures protect you.

We are sure that should you be successful in securing a volunteer role, you will find your time with QAC satisfying.

The QAC takes very seriously its responsibilities for the safety and welfare of its service users, its volunteers and the organisation as a whole.

QAC employment and volunteer posts are exempt from the terms of the Rehabilitation of Offenders Act 1974, and as such you are required to disclose all criminal convictions, including those which are 'spent'.

Your Details

Name: _			
Address.		 	-
-			 _
-		 	 _
-			 -
Postcode:		 	
Telephone	Textphone:	 	 _
Email:			

Please therefore complete	the following declaration	ı:
Have you ever been caut offence?	ioned, reprimanded or	convicted for any criminal
Yes □	No 🗆	
If the answer is yes, please	e give full details-	
	•	receipt of a satisfactory criminal
		iminal Records Bureau before the
	·	details of cautions, reprimands or
final warning, as well as co	onvictions.	
Personal profile Please tell us as much as	you can. This will help us	s find you the right volunteer role.
What has attracted you to (Tick as many boxes below		ng with the QAC?
☐ Personal and pro	ofessional development	☐ Helping people
☐ Employee volunt	eering	☐ Social opportunities
☐ Other – please s	pecify	
Do you have any skills/QAC?	experience that you w	ould particularly like to use at

QAC?	any skills/intere	ests that yo	ou wou	ld particul	arly like	to dev	elop at
Do you impairmen	have any ex t/disabilities?	kperience	of sı	upporting	people	with	visual
☐ Family	☐ Personal	□ Collea	ague	☐ Friend			
□Other–ple	ease specify						
PREVIOUS	VOLUNTARY W	ORK/EMPL	OYMEN	NT			

	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
etc]			
	rrent clean driving lic	cence?	
	rrent clean driving lic	cence?	
Do you hold a cu l	No 🗆	cence?	
Do you hold a cur	No 🗆		

			
Postcode			
Contact N	umber:		
Please note –	tails of two referees. Teferees can be employers of the e		
1. Name:			
Address			
Postcod	e:		
Telepho	ne/ Textphone:		
Email: _			
Relation	ship to you:		

2. Name:		
Address:		
Postcode:		
Telephone	Textphone:	
Email:		
Relationsh	p to you:	
will be required	ulnerability of some of the College's clients, a full CRB Disclos prior to you undertaking any volunteer work. Can you ple e the following declaration in the interim?	
•	current criminal convictions you wish to disclose?	
Yes	No □	
Please not - indi	ember of the European Community, do you require a work perioduals need a work permit or student visa to volunteer and carrie, including voluntary work, on a visiting visa.	
Yes	No	
Signature:	Date:	_