

### The volunteer role you are applying for

What role are you applying for?

What location is this role based at?

### Your personal details

Title

First Name

Known as name

Surname

Email address

Home address

Post code

Telephone (day)

Mobile

Date of birth

We only use this information to confirm that you are over the age of 16, otherwise you'll need to be accompanied by an adult

Please upload a photo of yourself for us to make an identification badge (this does not have to be professional/passport quality, any self-portrait will be appropriate):

Do you have a current full UK driving licence? Yes  No

Do you have the use of a car? Yes  No

Are you an EU/EEA national? Yes  No

If no, please provide further details:

### Your availability

Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday	
AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM

Frequency

### More about you

Why do you want to volunteer for Greyhound Trust?

Do you have any skills or experience that may be particularly helpful to Greyhound Trust?

What experience do you have of caring for or handling dogs?

Have you volunteered with Greyhound Trust at this or another location previously?

Yes  No

If so please provide details in the box provided.

## Your Health

It is important for you to tell us about any health conditions or additional support needs you may have so we can support you appropriately in your role. (Please be aware that due to the physical nature of some of our roles and the accessibility of some of our locations we may find it difficult to accommodate individual needs).

Do you have any health conditions or support needs that may affect your volunteering or that our staff should be aware of? If yes, please list the details below:

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\*Please be aware disclosures are strictly confidential. Where a health disclosure is made and to ensure volunteering is accessible, applicants will be referred to our occupational health advisor to ensure reasonable adjustments can be made in your role and work area

## Rehabilitation of offender's act 1974

Do you have unspent criminal convictions registered against you? Yes  No

If yes, this may not prevent you from volunteering with us, but please provide details of any conviction, along with your application form in a sealed envelope addressed to;

## References

Please provide details of a referee and ensure you have their permission for Greyhound Trust to contact them. Referees should include a previous employer, college/school tutor, a previous volunteer manager or someone who holds a position of responsibility in the community. We cannot accept family members, partners or people you live with as referees.

Title		First Name		Surname	
Address					
Telephone					

Email address	
Relationship to you	

## In case of emergency

Please supply the details of someone who we can contact an emergency.

Title		First Name		Surname	
Address					
Telephone					
Email address					
Relationship to you					

## How did you find out about volunteering for Greyhound Trust?

Greyhound Trust volunteer <input type="checkbox"/>	Greyhound Trust website <input type="checkbox"/>	Greyhound Trust email <input type="checkbox"/>
I homed a greyhound <input type="checkbox"/>	Greyhound Trust staff <input type="checkbox"/>	Poster/leaflet <input type="checkbox"/>
Social Media <input type="checkbox"/>	Volunteer Centre <input type="checkbox"/>	Friend or family <input type="checkbox"/>

Other (Please specify):

## Declaration

I understand that it is recommended that I have an up-to-date Tetanus Vaccination before I volunteer with Greyhound Trust in a branch.

I understand that Greyhound Trust will maintain my information for administration and management purposes in accordance with the Data Protection legislation.

I understand that if I am successful in my application my information may be disclosed to Greyhound Trust employees responsible for volunteer coordination, health & safety representatives, Greyhound Trust service managers, Emergency Services personnel if necessary and the lead volunteer. I confirm that I understand that I will be asked to attend an informal interview for this role and if I am successful, an induction.

I understand that by declaring a health condition, I may be required to participate in an independent health assessment, the outcomes of which will enable Greyhound Trust to potentially support me better in my role.

**I confirm that I have completed this volunteer application with wholly accurate information at the time of submission and understand that failure to disclose information that may affect my volunteer role with Greyhound Trust, may result in the offer of a voluntary role being withdrawn.**

Signed

Date

When submitting this form electronically please type your name in place of a written signature, we will ask you to sign a printed copy if you are successful.

In order to communicate with you more effectively, better understand your preferences and ability to support our work, we may analyse your data.

For more information on this visit our privacy section on the website at; [greyhoundtrust.org.uk/privacy](https://www.greyhoundtrust.org.uk/privacy). You can opt out of communications or change your preferences at any time by phoning 02083353016 or visit <https://www.greyhoundtrust.org.uk/>

From time to time we would like to send you exciting updates about our work, products, services and how you can support us, including fundraising activities and research by post.

If you would prefer not to receive this information by post, please tick the box

Don't worry, you'll still receive updates and information from us regarding your volunteering role.

If you are happy to hear from us by email and/or phone, please indicate below:

- I'd like to receive emails
- I'd like to receive phone calls