



## Volunteer Application Form

Please complete all sections. All information given is treated in the strictest confidence.

|   |             |                |
|---|-------------|----------------|
| Title:  | First Name: | Last Name:     |
| Address:  |             |                |
| Home telephone if applicable:                                     |             |                |
| Mobile number:  |             |                |
| Please provide a working email address which you check regularly. |             |                |
| Email:  |             |                |
| Emergency Contact details:  |             |                |
| Name:   |             | Mobile number: |
| Address:  |             |                |

Age: 16-18  18-25  26-35  36-45  46-55  56-65  66+

1) Please briefly describe why you wish to volunteer with The Atkinson.

2) Please briefly explain any experience you have which may be relevant to volunteering with The Atkinson.

3) Do you have any health or mobility issues we would need to be aware of?

Yes  No

If 'Yes' please describe and include information about any medication you take for them. *In accordance with the Disability Discrimination Act 1995 this information is requested in order to establish whether any reasonable adjustments may be needed to assist you in performing your role and also so that we are prepared in the event of the condition occurring whilst you are volunteering with us*

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4) How did you hear about this opportunity?

**Data Protection Act 1998**

I agree that the information given in my application may be used for purposes registered under the Data Protection Act 1998, and I consent to the information being stored on manual and computerised files for relevant volunteering-related purposes.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please email your completed form to [volunteer@theatkinson.co.uk](mailto:volunteer@theatkinson.co.uk) Or by post to: **Volunteer and Skills Development Officer**, The Atkinson, Lord Street, Southport, PR8 1DB

If you have any queries or difficulties completing this form please email [volunteer@theatkinson.co.uk](mailto:volunteer@theatkinson.co.uk)

|                     |                |
|---------------------|----------------|
| For Office use only | Date Received: |
|---------------------|----------------|

## Equal Opportunities Monitoring

The Atkinson is committed to achieving Equal Opportunities in all aspects of its work. The information below will be detached and kept in the strictest confidence and only used to check that we are really providing a service that is accessible to everyone. If it is found that the volunteer programme is not accessible to all sections of the local community, positive action will be taken to rectify the situation. This information will be kept for monitoring purposes.

### 1) Age

|       |  |       |  |
|-------|--|-------|--|
| 16-17 |  | 18-19 |  |
| 20-25 |  | 26-35 |  |
| 36-45 |  | 46-55 |  |
| 56-65 |  | 66+   |  |

### 2) Gender Identity

|             |  |                   |  |
|-------------|--|-------------------|--|
| Female      |  | Male              |  |
| Transgender |  | Prefer not to say |  |

### 3) Sexual Orientation

|              |  |                   |  |
|--------------|--|-------------------|--|
| Heterosexual |  | Lesbian           |  |
| Gay          |  | Bisexual          |  |
| Other        |  | Prefer not to say |  |

### 4) Education and Qualifications

|  |  |   |  |
|--|--|---|--|
| No Qualifications  |  | Below level 2 (less than 5 GCSE grades A-C including Maths and English) |  |
| Above level 2 ( 5 or more GCSE grades A-C including Maths and English) |  | A-Level   |  |
| Degree   |  | Post Graduate Degree  |  |
| Other  |  | Prefer not to say   |  |

### 5) Employment

|                                    |  |                                |  |
|------------------------------------|--|--------------------------------|--|
| Employed                           |  | Self Employed                  |  |
| In training, education or learning |  | Not in employment or education |  |
| Other                              |  | Prefer not to say              |  |

### 6) Postcode (first 3 characters)

|  |
|--|
|  |
|--|

### 7) Ethnic Background

|                        |  |
|------------------------|--|
| Asian or Asian British |  |
|------------------------|--|

|  |  |                       |  |
|--|--|-----------------------|--|
| Indian                                 |  | Pakistani             |  |
| Bangladeshi                            |  | Chinese               |  |
| Other Asian background please specify: |  |                       |  |
| <b>Black or Black British</b>          |  |                       |  |
| Caribbean                              |  | African               |  |
| Other Black background please specify: |  |                       |  |
| <b>White</b>                           |  |                       |  |
| White British                          |  | White Irish           |  |
| Other White background please specify: |  |                       |  |
| <b>Dual Heritage</b>                   |  |                       |  |
| White & Black Caribbean                |  | White & Black African |  |
| White & Asian                          |  |                       |  |
| Other Dual Heritage please specify:    |  |                       |  |
| <b>Roma &amp; Travellers</b>           |  |                       |  |
| Roma                                   |  | Irish Traveller       |  |
| Prefer not to say                      |  |                       |  |

### 8) Religion

|                       |  |           |  |
|-----------------------|--|-----------|--|
| Atheist               |  | Agnostic  |  |
| Buddhist              |  | Christian |  |
| Hindu                 |  | Jewish    |  |
| Muslim                |  | Sikh      |  |
| Other please specify: |  |           |  |

### 9) Disability

|                       |  |                                 |  |
|-----------------------|--|---------------------------------|--|
| Sensory disability    |  | Physical disability             |  |
| Learning disability   |  | Mental health issues            |  |
| Multiple disabilities |  | Life-limiting/long term illness |  |
| None of the above     |  | Prefer not to say               |  |

### 10) Additional Information

|                       |  |                      |  |
|-----------------------|--|----------------------|--|
| Low income            |  | Homeless             |  |
| Young carer           |  | At risk of exclusion |  |
| Offender/ex offender  |  | Lone parent          |  |
| Refugee/Asylum seeker |  | In or leaving care   |  |
| None of the above     |  | Prefer not to say    |  |