



## **VOLUNTEER APPLICATION FORM**

**NAME:**

**ADDRESS (including post code)**

**TELEPHONE NUMBER:**

**E-Mail:**

**OCCUPATION:**

**DATE OF BIRTH:**

**What experience, if any, do you have of working with older people?**

**It would be helpful if you could provide information about your skills, interests and previous experience (please be specific about particular skills you would like to bring to OPAL e.g. driving, computer skills, handyman skills etc)**

**How much time could you commit to voluntary work with OPAL?**

**We need our volunteers to commit themselves to a regular day and time either weekly or monthly. This enables our members feel secure.**

**Occasionally**

**2 – 4 hrs per week**

**4 – 8 hrs per week**

**1 day or more**

**More than 2 days per week**

**Mornings, afternoons or evenings?**

**What aspects of OPAL's work are you interested in?**

**Befriending**

**Handyman work**

**Driving**

**Fundraising**

**Helping on social activities and trips**

**Helping with administrative/office work**

**Other.....**

**Are you able to work independently and unsupervised in the homes of our members?**

**OPAL will give support, sometimes in their own homes to vulnerable people who are elderly. You will therefore appreciate that OPAL has a duty to seek information concerning your background and obtain clearance from the criminal records bureau.**

**Have you ever been convicted of any offence? If so, what were the circumstances? (Your answer is entirely confidential and is asked in accordance with Social Services guidelines.)**

**Please give the name and address of two referees (excluding family members). Please state the capacity in which you are known to them and for how long you have known them.**

**1.**

**2.**

**OPAL will need to be satisfied in regard to 1. and 2. before a volunteer is registered and allowed to start work.**

**Signed .....**

**Date .....**

**When you have completed the application form please return it to:**

**Sally-Anne Notley  
OPAL  
Unit 10  
Holt Park District Centre  
Leeds  
LS16 7SR  
Tel. 0113 261 9103  
Sally-anne@opal-project.org.uk**