

Volunteer Registration of Interest Form

Please print clearly in BLOCK LETTERS

How we will use your information

We will use your information to provide the service requested. We may share your personal data between our services and with partner organisations, such as government bodies and the police. We will do so when it is of benefit to you, or required by law, or to prevent or detect fraud. To find out more, go to Harlow Council privacy notice <https://www.harlow.gov.uk/your-council/accessing-information/privacy-notice>

1 Contact details

Your name	Full name	<input type="text"/>	
Address	No. Street	<input type="text"/>	
	Town/City	<input type="text"/>	Postcode <input type="text"/>
Contact details	Phone	<input type="text"/>	Mobile <input type="text"/>
	Email	<input type="text"/>	
Emergency contact	Name	<input type="text"/>	Phone <input type="text"/>
		<input type="text"/>	

2 Volunteer groups

Which Council service would you like to volunteer for? (eg Museum and / or Walled Gardens , Pets' Corner, Town Park, Playhouse, Parndon Wood, Housing, Leah Manning Centre)

3 Personal information

Tell us about any particular experience or skills that you would bring to the group as a volunteer? If you are already performing volunteer duties please indicate the type of duties you currently do.

Experience/skills

Activities currently performing

4. Support you would need and any medical conditions

We want to support volunteers from all sections of the community at every stage. Use the space below to tell us about your own specific needs, if any. These could relate to physical or mental health, mobility, religion, culture or anything else you feel it's important for us to know about.

Do you have any medical condition(s) that may affect the type of work you can safely do as a volunteer? For example a back injury or heart condition that restricts manual labour capacity. If YES provide details in space below to assist the Council to complete your registration for Harlow Council to review any reasonable adjustments for you to undertake the voluntary work

. Please tick the appropriate box ✓

No Yes If Yes, details:

Do you have any additional care and support needs that we should be aware of?

Are you prescribed any medicines to which the Council would need to be aware of in relation to you carrying out volunteer tasks and duties e.g. inhaler? Do you have any allergies? If so, do you have your medication with you?

Availability

Please indicate your availability in the boxes below:

Time	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Morning							
Afternoon							
Evening							

5 Council commitment

The Council values the contribution of volunteers and will ensure that a safe work environment, necessary protective equipment and comprehensive volunteer management systems are provided at all times. Volunteers performing sanctioned group duties will have the coverage of the Council's public liability and limited personal accident insurance policies

6 Volunteer commitment

I agree to conduct myself in a manner that is safe for me, other volunteers and Council staff. I shall accept the guidance of the Council appointed supervisor and participate in any technical or safety training that is required. I shall notify my supervisor of any change to my ability to act as a volunteer.

Signature of Volunteer

Date

/ /

Declaration

I confirm the information given in this application is correct to the best of my knowledge. I accept that if I give false information I will not be allowed to continue volunteering for Harlow Council.

I understand that this information will be kept in accordance with data protection legislation. I confirm I have read and understood the terms that explain how my information may be used.

Signed: _____ Date: _____

Where to send this form

Please email your completed form to: volunteering@harlow.gov.uk

Alternatively you can post this form to:

Becci Court, Harlow Council, Civic Centre, The Water Gardens, Harlow, Essex, CM20 1WG What happens next

Your application will be sent to the volunteer manager for the role for which you have applied. They will contact you to arrange an informal chat, and may ask you to bring identification documents. If you and the volunteer manager agree you would like to continue with the application.

You may be asked to carry out a trial volunteer session or training. Once complete, the volunteer manager will agree a start date and ask you to sign a volunteer agreement – you can then begin your volunteer role.

Privacy note: All information that you provide on this form will only be used for the purposes of your involvement with the volunteer group that you have nominated. Information will not be used or released for any other purpose.

OFFICE USE ONLY:

Recruiting Manager:

Start date:

DBS details: