

Volunteer Registration Form

Section 1 – Personal Details

Surname:	Forename(s):
Address:	Telephone: _____
Post Code:	Email: _____
Emergency contact name:	Emergency contact number:

Are you interested in a particular volunteering position? _____

Section 2 – Why would you like to volunteer with Springfield Mind

What skills and experience can you bring to volunteering at Springfield Mind?

You may wish to include lived experience you have acquired that can support this registration as well as skills and experience from within the working environment or outside. Please continue on a separate sheet if necessary.

Section 3 – How long are you able to commit to Springfield for as a volunteer (please circle)

Up to 3 months	up to 6 months	up to 1 year	more than 1 year
----------------	----------------	--------------	------------------

Version + Creation date: V3.0 7th July 2017
 Owner's Job Title: Business Manager
 Review Date: 30th June 2018
 Sharepoint Location: Volunteers/Recruitment



Section 4 – When are you available (please circle)

Monday am	Tuesday am	Wednesday am	Thursday am	Friday am	Saturday am	Sunday am
Monday pm	Tuesday pm	Wednesday pm	Thursday pm	Friday pm	Saturday pm	Sunday pm

Section 5 – How did you hear of our volunteering opportunities?

Section 6 – Are you are car driver?

Yes No

Section 7 - References

Please give the details of two people to whom we may contact for references:	
Name:	Name:
Position:	Position:
Name of Company:	Name of Company:
Address:	Address:
Telephone Number:	Telephone Number:
Email Address:	Email Address:
Length of Time Known:	Length of Time Known:

Section 5 – Convictions. If you have been convicted of a criminal offence please give details of date (s), offence, nature of offence and sentence passed:

Section 7 – Data Protection / Equality and Diversity

I confirm that I am happy for Springfield Mind to hold confidential information about me, for data monitoring and equality and diversity purposes, per the Data Protection Act (1998):

Version + Creation date: V3.0 7th July 2017
 Owner's Job Title Business Manager
 Review Date 30th June 2018
 Sharepoint Location Volunteers/Recruitment



Applicant's Signature

Date / /

CONFIDENTIAL MONITORING FORM

This form is completely confidential and is to enable us as a business to measure which demographic of applicants we are reaching and who we are not. By agreeing to fill in this form, you are giving us consent to use this data in our reporting..

GENDER

Do you identify as: Male Female

AGE

Age range:	18-29	30-39	40-49	50-59	60+	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ETHNIC ORIGIN:

What is your ethnic Group? Please choose one from A to E, then tick the appropriate box to indicate your cultural background.

A White

British Irish Other White.....

B Mixed

White and Black Caribbean White and Black African
 White and Asian

C Asian or Asian British

Indian Pakistani Bangladeshi
 Other Asian.....

D Black or Black British

Caribbean African Other Black.....

E Chinese or other Ethnic Group

Chinese Other Ethnic Group.....

Version + Creation date: V3.0 7th July 2017
Owner's Job Title Business Manager

Review Date 30th June 2018
Sharepoint Location Volunteers/Recruitment



MARITAL STATUS:

Married	<input type="checkbox"/>	Widowed	<input type="checkbox"/>
Separated	<input type="checkbox"/>	Single	<input type="checkbox"/>
Divorced	<input type="checkbox"/>	Living with Partner	<input type="checkbox"/>

RELIGION

Please specify which category of faith you belong to:

Baha'i	<input type="checkbox"/>	Judaism	<input type="checkbox"/>
Buddhism	<input type="checkbox"/>	Parsi	<input type="checkbox"/>
Christianity	<input type="checkbox"/>	Sikhism	<input type="checkbox"/>
Hinduism	<input type="checkbox"/>	Other	<input type="checkbox"/>
Islam	<input type="checkbox"/>	None	<input type="checkbox"/>
Jainism	<input type="checkbox"/>		

SEXUAL ORIENTATION

Please specify your sexuality:

Heterosexual	<input type="checkbox"/>	Lesbian	<input type="checkbox"/>
Homosexual	<input type="checkbox"/>	Bisexual	<input type="checkbox"/>
Other	<input type="checkbox"/>		

DATA PROTECTION ACT

I agree that the information given on this form may be processed and saved, in accordance with the Data Protection Act. I agree to the storage of this information on manual and computerised files.

Signature _____

48 Cygnet Court
Timothy's Bridge Road
Stratford-upon-Avon
Warwickshire
CV37 9NW

01789 298615
www.springfieldmind.org.uk
enquiries@springfieldmind.org.uk
Registered Charity 1073391
Company Registration 3575529

Version + Creation date: V3.0 7th July 2017
Owner's Job Title Business Manager

Review Date 30th June 2018
Sharepoint Location Volunteers/Recruitment



Date _____

Version + Creation date: V3.0 7th July 2017
Owner's Job Title Business Manager

Review Date 30th June 2018
Sharepoint Location Volunteers/Recruitment

