# S:\Volunteers\Interjunction\Marketing\Interjunction bridge logo FINAL_FULL COLOUR.jpgVOLUNTEER APPLICATION FORM

###### Confidential

*Once completed, please return to:*

**Volunteers Department, Kids’ City**

1-4 Brixton Hill Place

London , SW2 1HJ

**Phone:** 020 8678 5957

**E-mail:** [interjunction@kidscity.org.uk](mailto:interjunction@kidscity.org.uk)

|  |  |  |  |
| --- | --- | --- | --- |
| Title: | Full Name: | | DOB: |
| Address: | | | |
| Mobile Telephone: | | Home Telephone: | |
| E-mail address: | | Best time to contact you? | |

|  |  |
| --- | --- |
| Name of Emergency Contact: | Relationship: |
| Contact Number: |
| Address: | |

## Role applied for (if not applying for a specific role leave blank) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I want to volunteer in......**

Play settings Schools Sports Arts

Business Administration The Community Other, please specify

### Please tick boxes below to indicate day/s you can attend regularly

### We ask that volunteers are able to commit to a minimum of 36 hours of volunteering

**Are you currently studying or working Yes  No**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Mon | Tues | Wed | Thurs | Fri | Sat | Sun |
| am pm | am pm | am pm | am pm | am pm | am pm | am pm |

**EDUCATION, WORK HISTORY (including voluntary work) AND QUALIFICATIONS (please include any present study)**

**Particular Skills or Interests:**

|  |  |  |  |
| --- | --- | --- | --- |
| Organisation and role | Dates from Month / Year | Dates to Month / Year | Any Qualifications gained |
|  |  |  |  |

**Additional Information for Placement:**

|  |  |  |  |
| --- | --- | --- | --- |
| I give permission for photographs/videos taken while volunteering to be used by Kids’ City and partner organisations for publicity | Yes No |  |  |

|  |
| --- |
|  |

Please use the space below to give reasons why you would like to volunteer with Kids’ City and any other information you would like to provide.

|  |
| --- |
| *If there is not sufficient space here, please attach additional sheets* |

To ensure the safety of vulnerable service users, we carry out police checks through the Disclosure and Barring Service (DBS) for all Kids’ City volunteers and staff over 16 years of age. Please note that exemption under the Rehabilitation of Offenders Act 1974 does not apply. You **must** include details of convictions, cautions, reprimands and final warnings, includingspent convictions, **including those related to juvenile offences**.

GUIDANCE FOR APPLICANTS WITH CAUTIONS OR CONVICTIONS

If the conviction is of a serious nature it is unlikely we will be able to offer you a volunteer role however each case will be assessed individually by a panel. If we do not receive detailed information we will have no option but to turn down your application as we need full details to access applications effectively. We will generally ignore minor convictions and convictions that have no relevance to the type of work offered e.g. driving disqualification unless for a driving post.

|  |  |  |  |
| --- | --- | --- | --- |
| Have you ever been convicted of any criminal offences or been given a caution or reprimand? | | YES  NO | |
| Are you aware of any other circumstances that might affect your suitability to work, or be in regular contact with children? | | YES  NO | |
| Have you ever had a child removed from your care or placed on the “At Risk” register? | | YES  NO | |
| If you have answered yes to **any of the above**, please give details including dates and details of any sentencing below. | | | |
| *If there is not sufficient space here, please attach additional sheets* | | | |
| Have you had an Enhanced Disclosure issued within the last 3 years for working with children? | | | YES  NO |
| if you have answered yes, please provide the Disclosure number and date of issue (if known) | | | |
| Disclosure number: | Date of issue: | | |

**By signing this form you confirm that information provided in support of this application is complete and true and understand that knowingly making a false or misleading statement will result in immediate removal from our services.** I declare that I have understood and complied with the requirements stated and I give consent for the information provided to Kids’ City to be held on file and computer with due consideration to the **Data Protection Act 1984**. I further give authority for Kids’ City to pass on information to OFSTED, the DBS and partner organisations I am placed as a volunteer with**.**

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_

**Only completed and signed applications will be accepted**

# EQUALITY OF OPPORTUNITY MONITORING

Kids’ City believes volunteering should be accessible to all. To help us ensure we adhere to our Equal Opportunities Policy, we ask you to complete this form. Whilst this is not mandatory, your help would be much appreciated. This sheet will not form part of your application and will remain confidential.

**Gender**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Male |  | Female |

**Age Group**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 14-18 |  | 19-24 |  | 25-34 |  | 35-44 |  | 45-54 |  | 55-64 |  | 65-74 |  | 75+ |

## Employment status

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Student |  |  | Employed  (part-time) |  | Employed  (full-time) |  | Self- employed |  | Retired |  | Unemployed, if so, for how long? |

|  |  |
| --- | --- |
| Postcode |  |

|  |  |
| --- | --- |
| How did you hear about volunteer opportunities at Kids’ City? |  |

## Would you consider yourself to belong to any of the following groups?

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Special educational  needs |  | Refugee  status |  | Asylum Seeker |  | Lone Parent |  | Physical disability |  | Learning disability |  | Income Support |

**Ethnic monitoring**: the following categories are those recommended by the Equality and Human Rights Commission under the guiding principles for choosing ethnic monitoring categories for organisations operating in England and Wales.

## A. White

|  |  |
| --- | --- |
|  | English / Welsh / Scottish / Northern Irish / British |
|  | Irish |
|  | Gypsy or Irish Traveller |
|  | Any other White background. Please state: |

##### 

### B. Mixed / multiple ethnic groups

|  |  |
| --- | --- |
|  | White and Black African |
|  | White and Asian |
|  | White and Black Caribbean |
|  | Any Other Mixed / multiple ethnic background. Please state: |

**C. Asian / Asian British**

|  |  |
| --- | --- |
|  | Indian |
|  | Pakistani |
|  | Bangladeshi  Chinese |
|  | Any Other Asian Background. Please state: |

### D. Black / African / Caribbean / Black British

|  |  |
| --- | --- |
|  | Caribbean |
|  | African |
|  | Any Other Black Background. Please state: |

### E. Any Other Ethnic Group

|  |  |
| --- | --- |
|  | Arab |
|  | Any Other Background. Please state: |