

**Volunteer Application Form**

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| **Personal Information** |
| Forename(s) |  |
| Surname/Family Name |  |
| Preferred Name (if applicable) |  |
| NI Number |  |
| Next of kin name |  |
| Next of kin contact number |  |

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| **Contact Details** |
| Address: | Mobile Number:  |  |
| Home Telephone Number:  |  |
| Work Telephone:  |  |
| May we contact you at work?  |  |
| Email:  |  |
| Postcode: | Preferred method of contact: |  |
|  |  |
| **Tell us about your skills, experience, qualities and any training that you have undertaken that you think make you suitable to volunteer with New Leaf Initiative:** |
| **Why do you want to volunteer with New Leaf? Please tell us what motivates you to become a volunteer with New Leaf:** |
| **We need to know when you are available to volunteer with New Leaf, so please tick in the boxes when you would like to volunteer.** |
| **DAY** | **Morning** | **Afternoon** | **Evening** |
| Monday |  |  |  |
| Tuesday |  |  |  |
| Wednesday |  |  |  |
| Thursday |  |  |  |
| Friday |  |  |  |
| Saturday |  |  |  |
| Sunday |  |  |  |

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| **References: We need you to provide us with the details of TWO people that can provide you with a reference that will confirm that you are suited to being a volunteer with New Leaf. They should both be over 18 and NOT be members of your family.** |
| **Reference 1** | **Reference 2** |
| Name: | Name: |
| Address: | Address: |
| Postcode: | Postcode: |
| Telephone: | Telephone:  |
| How do you know this person?  | How do you know this person?  |
| How long have you known this person? | How long have you known this person? |

**PLEASE RETURN THIS FORM TO:**

**The New Leaf Initiative C.I.C.**

**9 Allcock Street**

**Digbeth**

**Birmingham**

**B9 4DY**

**WE WILL CONTACT YOU WITHIN TWO WEEKS OF RECEIPT OF YOUR APPLICATION**

**THANK YOU FOR SHOWING AN INTEREST IN NEW LEAF**