



Ystradgynlais Volunteer Centre
 @ Old Remploy, Wind Road,
 Glanrhyd, Ystradgynlais, Swansea
 Valley, SA9 1AF.

Canolfan Wirfoddol Ystradgynlais

Tel : **01639 845475 / 849192**

Reg CIO: 1160733

Email: yvcvolunteering@gmail.com

Volunteer Application Form

(to be returned to Ystradgynlais Volunteer Centre)

Date:			
Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify):
Name:			
Address:			
Postcode:		Date of Birth:	

Telephone Number:			
Mobile Number:			
Email Address:			

Do you have a full, clean driving licence?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you own your own vehicle?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Are you?				
<input type="checkbox"/> Employed	<input type="checkbox"/> Unemployed	<input type="checkbox"/> Non-employed	<input type="checkbox"/> Retired	<input type="checkbox"/> Student

When are you available to volunteer?							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How much time would you like to give?	
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Do you have health problems which may affect you as a volunteer or which could affect your voluntary work?	
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What type of voluntary work are you interested in?

- | | | |
|--|--|---|
| <input type="checkbox"/> Administration and office | <input type="checkbox"/> Driving | <input type="checkbox"/> Management/committee work |
| <input type="checkbox"/> Advice work and counselling | <input type="checkbox"/> Drugs and addictions | <input type="checkbox"/> Marketing, PR and media |
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> Education and literacy | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Elderly | <input type="checkbox"/> Overseas activities |
| <input type="checkbox"/> Befriending | <input type="checkbox"/> Employment | <input type="checkbox"/> Practical and DIY |
| <input type="checkbox"/> Campaigning and lobbying | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Prisoners and ex-offenders |
| <input type="checkbox"/> Caring | <input type="checkbox"/> Gender and sexuality | <input type="checkbox"/> Race, ethnicity and refugees |
| <input type="checkbox"/> Charity shops and retail | <input type="checkbox"/> Sustainable development (green) | <input type="checkbox"/> Sports, recreation and leisure |
| <input type="checkbox"/> Children and families | <input type="checkbox"/> Homelessness and housing | <input type="checkbox"/> Teaching and training |
| <input type="checkbox"/> Community safety | <input type="checkbox"/> Hospitals and hospices | <input type="checkbox"/> The arts, culture and heritage |
| <input type="checkbox"/> Community work | <input type="checkbox"/> Human and civil rights | <input type="checkbox"/> Trustees |
| <input type="checkbox"/> Computers and technology | <input type="checkbox"/> Languages | <input type="checkbox"/> Women's groups |
| <input type="checkbox"/> Disability and health | <input type="checkbox"/> Legal work | <input type="checkbox"/> Youth work |

To help with equal opportunities monitoring and to ensure we are delivering a service to the whole community, we would be grateful if you would complete the following:

- | | | | |
|---------------------------------|-----------------------------------|---------------------------------------|--------------------------------|
| Gender: | Age: | Employment status: | Ethnicity: |
| <input type="checkbox"/> Male | <input type="checkbox"/> Under 18 | <input type="checkbox"/> Employed | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Female | If yes, how old _____ | <input type="checkbox"/> Unemployed | <input type="checkbox"/> Black |
| | <input type="checkbox"/> 18 – 25 | <input type="checkbox"/> Non-employed | <input type="checkbox"/> White |
| | <input type="checkbox"/> 26 – 35 | <input type="checkbox"/> Retired | <input type="checkbox"/> Other |
| | <input type="checkbox"/> 36 – 50 | <input type="checkbox"/> Student | |
| | <input type="checkbox"/> 51 – 65 | | |
| | <input type="checkbox"/> Over 65 | | |

- | | | | |
|--|---|------------------------------|---|
| Do you consider yourself to be disabled? | <input type="checkbox"/> Yes
<input type="checkbox"/> No | Are you registered disabled? | <input type="checkbox"/> Yes
<input type="checkbox"/> No |
|--|---|------------------------------|---|

- | | |
|--------------------------|--|
| Are you a Welsh speaker? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--------------------------|--|

Any other information:

How did you hear about us?

- | | | |
|--|---|--|
| <input type="checkbox"/> Volunteering Wales website | <input type="checkbox"/> Open day / event | <input type="checkbox"/> Leaflet / poster |
| <input type="checkbox"/> Friend / colleague | <input type="checkbox"/> Referred by other organisation | <input type="checkbox"/> Talk / presentation |
| <input type="checkbox"/> Powys Volunteer Centre (PAVO) | <input type="checkbox"/> YVC Website / Facebook | <input type="checkbox"/> Other: (please specify below) |

Privacy Notice

YVC is a voluntary organisation which aims to facilitate volunteering opportunities in the Ystradgynlais area. In addition YVC runs a recycling centre in which people volunteer and to raise funds to support wider volunteering activity. In order to be able to operate, it is in the legitimate interest of the YVC to collect the following information from our volunteers and customers.

(a) Volunteers

- Name
- Contact details
- Date of birth
- Volunteering interests
- Next of kin details

Some of this information is shared with the Volunteering Wales website platform.

If you wish to see the information we hold on you please contact us at Ystradgynlais Volunteer Centre, Old Remploy, Wind Road, Glanrhyd, Ystradgynlais, SA9 1AF or email ystradgynlaisyvc@hotmail.com

If you have any concerns about the way we handle the information please contact us and inform us of it. We will do our best to satisfy your concerns within the parameters of the operation of the YVC.

If we fail to satisfy your concerns, or if you need any advice on the handling of your information, then you should contact the Information Commissioner's Office (ICO) helpline on: 0303 123 1113.

Declaration

- I confirm that I have read and understood the information and guidance within this document
- I do/do not give permission for my information to be passed on to other organisations
- I will respect the privacy of clients, other volunteers and staff
- I confirm that the information I have provided in this application form is true and accurate
- Due to new data protection laws please sign below if you agree to your details being entered on to our online database.

Volunteer signature: _____ Date: _____

Next of Kin Details:

Title:	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify):
Name:	
Address:	
Postcode:	
Telephone No:	

Important information about benefits

- If you are receiving benefits, you must inform your benefits advisor about your voluntary work
- State retirement pension will not be affected by your voluntary work. However, large transport expenses may be taxable.

DBS / Criminal Record Checks

- Some placements may require you to have a DBS check and this will be advised by the individual organisation.

Confidentiality

- Volunteers are reminded that any confidences they may come across in the course of their work should be kept confidential at all times, however insignificant they may seem.
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OFFICE USE ONLY			
Application Received:		References Requested:	
DBS Details Received:		References Received:	
Training Requested:	Date:	Type:	
Training Record:			