

## **Application for volunteer placement: SCHOOL STUDENTS**

Personal details (in block letters)

(								
First name:		Last name:						
Previous name(s):		Known As:		Title				
Address:								
Who to contact in an emergency:	Name:							
	Relationship:	YOUR Mobile:						
	Number:							
Your Email:			Date of birth:					
School and Year	e.g. Yr 12 Ark Putney Academy							

Preferred placement(s)									
School volunteers are generally placed to support Satu					aturday or Sunday activities due to supervision requirements.				
There are no supervised activities on a Sunday afternoon.									
Saturday Boccia (wheelchair bowls)									
Saturday Concert									
Sunday church service									
Fundraising (ad hoc)									
Availability	Monday	Tuesday	Wedneso	day	Thursday	<del>Friday</del>	Saturday	Sunday	Ad hoc
10.30am - 12.30pm									
1.30pm – 3.30pm									

## Please note:

- We require a minimum commitment of 50 hours or six months in a regular time slot
- > Some roles are flexible and do not require a fixed day (but this is after an initial 6 months)

## A bit about you:

Training/Skills/Languages/Hobbies/Interests that might be useful/transferable in your volunteering role					
e.g. A levels in Biology, Maths, Physics; sing in choir, play guitar, enjoy sports etc					
The first three words that come to mind to describe you.					



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What inspires you to want to volunteer for the RHN?							
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Supporting do		ducation, we will need to hav	o a cionaturo hol	ow from	m the He	and of Sixth Form of	or conior
		that the information on this f					
		rfere with your studies). We					
•		, commitment, initiative, team		•	_		6 (0.8.
School Contac	t:						
Name:	<u>-                                      </u>		Job title:				
			Job title.				
School:							
Email :			Signature:				
Confirmation 1	rom Parent	'Guardian					
	-	s to confirm that they are ha	ppy with you volu	unteerii	ng for a	minimum of 6 mor	nths in a
regular shift pa		•	,		J		
Name:			Relationship to	you:			
Email :			Signature				
Criminal convi		Debelikation of Official on Ast	1074		-11	· · · · · · / · · · · · · · · · · · · ·	
	-	Rehabilitation of Offenders Act 1	•				
any cautions. Disclosure of a conviction, caution or reprimand does not necessarily mean that you will not be appointed. However an offer of a placement may be withdrawn or dismissal may result if criminal offences are not disclosed.							
Have you ever been convicted of a criminal offence?  No Yes.							
The you ever been convicted of a chilinial offence;							
Declaration							
I confirm that to the best of my knowledge all information I have given in my application is correct. Any false, deliberate							
omission or misleading information may be sufficient cause for rejection or cessation of volunteer placement.							
The Royal Hospital for Neuro-disability (RHN) is committed to protecting your privacy and our privacy policy is							
written in accordance with the Data Protection Act (2018). We collect personal information about you when you							
register to volunteer with us. This may include your name, addresses, telephone numbers, email, date of birth,							
photographs and other personal details. By signing this Volunteer Application Form, you give permission for the							
RHN to hold and process personal information and this includes consent to email you with service updates and							
information relevant to your volunteering role.							
Signature:				Date	e:		
If returning by email, please check this box to confirm your agreement to above statement:							
Once completed planes   France Continuisht Volunteer Constitution BUN Most Will Button CM/45 2004							
Once completed, please   Emma Cartwright, Volunteer Coordinator, RHN, West Hill, Putney, SW15 3SW							