



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:	<i>Name:</i> <i>Relationship:</i> <i>Number:</i>		YOUR Mobile:		
Your Email:			Date of birth:		
School and Year	<i>e.g. Yr 12 Ark Putney Academy</i>				

Preferred placement(s)								
<i>School volunteers are generally placed to support Saturday or Sunday activities due to supervision requirements. There are no supervised activities on a Sunday afternoon.</i>								
Saturday Boccia (wheelchair bowls) Saturday Concert Sunday church service Fundraising (ad hoc)								
Availability	Monday	Tuesday	Wednesday	Thursday	Friday	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
<i>e.g. A levels in Biology, Maths, Physics; sing in choir, play guitar, enjoy sports etc...</i>
The first three words that come to mind to describe you.



What inspires you to want to volunteer for the RHN?

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Supporting documents

As a student in full time education, we will need to have a signature below from the Head of Sixth Form or senior member of staff, confirming that the information on this form is accurate and that they are happy for you to volunteer with us (i.e. it will not interfere with your studies). We will liaise with this person regarding your volunteering (e.g. attendance record, empathy, commitment, initiative, teamwork etc.) and contact them if we have any concerns.

School Contact:

Name:		Job title:	
School:			
Email :		Signature:	

Confirmation from Parent/Guardian:

Your parent/guardian needs to confirm that they are happy with you volunteering for a minimum of 6 months in a regular shift pattern (weekly).

Name:		Relationship to you:	
Email :		Signature	

Criminal convictions

The RHN is exempt from the Rehabilitation of Offenders Act 1974 so you must declare all convictions (spent and unspent) and 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 However an offer of a placement may be withdrawn or dismissal may result if criminal offences are not disclosed.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?	<input type="checkbox"/> No <input type="checkbox"/> Yes.
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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:	
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If returning by email, please check this box to confirm your agreement to above statement:

Once completed, please return this form to:	Leisure and Family Services, RHN, West Hill, Putney, SW15 3SW E: leisureandfamilyservices@rhn.org.uk T: 020 8780 4500 x 5897
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