Logo

Description automatically generated with medium confidence

Volunteer Contact Info. Form

Role title: **Stakeholder Administration Volunteer** Date:

1. The role you are interested in

Surname:       Title: Mr/Mrs/Ms/Miss

First name(s): Date of birth:

Address:      Contact number:           

Email:

Postcode:      

Do you have a DBS number? (YES) (NO)

How did you hear about volunteering?

Word of mouth Event Internet Social Media. Other – Please give details:

2. Personal Information

3.Interests and reasons for volunteering

What do you hope to gain from volunteering with ASNA

4. Skills and experience

Please tell us about any paid/voluntary work experience.

Please tell us about any skills, qualifications or training that you consider relevant to the role.

What is your availability for volunteering? E.g. one or two days a week or fortnight,

Are you available at the weekends? Yes/No

5. Availability

6. References

Please provide contact details of two people you have known for at least a year who we can ask for a reference. Please note we always take references, including criminal records checks (DBS), if the role involves working with children, vulnerable adults or sensitive information.

Name: Name:

Address: Address:

Postcode: Postcode:

Email: Email:

Occupation: Occupation:

Relationship: Relationship:

7. Emergency contact details

Please give the details of someone we may contact in an emergency

Full name: Relationship:

Address: Mobile:

Email:

**How to apply:** Please send the completed volunteer enquiry form to:

info@asna.info

*Or write to us at: ASNA office, Alma Park Estate, Grantham, Lincolnshire, NG31 9SL. Telephone: 07768298297*