



HALLIWELL BEFRIENDING SERVICE

Volunteer Application Form

Personal Details

Full Name	
Address	
Post Code	
Tel / Mob Number	
Email Address	
Date Of Birth (Optional)	
Are you over 18?	

Skills (Which are relevant to the work undertaken)

Work/Voluntary Experience

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Criminal Offences

Have you ever been convicted of any criminal offence, or are you subject to any criminal proceedings at present?	
Are you willing to undertake a DBS check?	

Please note that minor motoring offences need not be disclosed. However, as work with people over the age of 50 years is not covered by the Rehabilitation of Offenders Act, all other offences must be mentioned. If, therefore, the answer to the above is yes, please enclose details in a separate envelope marked CONFIDENTIAL. Please note that the existence of a criminal record does not automatically debar you from this kind of work. Any information you provide will be dealt with in STRICTEST CONFIDENCE.

References

Name
Address
Tel. No.
Email Address
In what Capacity do they know you

Name
Address
Tel. No.
Email Address
In what Capacity do they know you

Matching you up as a Visitor

Do you have a full clean driving licence?	
Do you have your own transport?	
Do you have any health problems that may prevent you from undertaking this work in certain circumstances	

If Yes to above, please explain health issues

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Days/Hours available that you are able to commit to regularly

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Any Other Information

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Please post or email your completed application to address below

Signed		Date	
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haliwellbefriending@googlemail.com

01204 840808