

LEICESTER ASIAN CARNIVAL 2010

Volunteer Application Form



> Tell us who you are and how to get in touch with you

Full name	<input type="text"/>		
Address (including Postcode)	<input type="text"/>		
Telephone (Including STD Code)	<input type="text"/>	Mobile	<input type="text"/>
Email address	<input type="text"/>		

> Use this section to tell us about your skills and interests

Your availability (Please tick as appropriate)	Thurs am <input type="checkbox"/> pm <input type="checkbox"/>	Fri am <input type="checkbox"/> pm <input type="checkbox"/>	Sat am <input type="checkbox"/> pm <input type="checkbox"/>	Sun am <input type="checkbox"/> pm <input type="checkbox"/>	Totally flexible <input type="checkbox"/>
Tell us about any volunteering experience or any previous employment you have?					
<input type="text"/>					
Skills, interests or hobbies					
<input type="text"/>					
Are there any particular skills you would like to develop by volunteering with LAC 2010?					
<input type="text"/>					

> Equal Opportunities

A) LAC 2010 welcomes volunteer applicants with all range of abilities for the skills they bring. We aim to create a positive environment that enables all volunteers to realise their full potential. So we can consider any appropriate adjustments to the volunteer environment and better support you in your role, please give details below of any disabilities or health issues.

B) Under the rehabilitation of Offenders Act 1974, do you have any unspent criminal convictions?
Yes No

If you have ticked yes, summarise details below. Having a conviction will not necessarily stop you from volunteering, but will need to be taken into consideration when assessing your suitability.

C) What age group do you fall into? For insurance purposes you must be at least 16years of age to volunteer : 16yrs 17yrs 18yrs and over

> **Who can we contact as referees?**

This can be your previous manager, a support/care worker, landlord, tutor or a professional.

1) Name

Address

Postcode

Tel No.

Email address

How do you know this person?

2) Name

Address

Postcode

Tel No.

Email address

How do you know this person?

Who can we contact in case of an emergency?

Name

Tel No

Mob

Relationship to individual

> **Your details** will be kept in accordance with the Data Protection Act 1998/2003. They will be held securely and confidentially. They will be accessed by authorised management.

I declare the information I have provided is true.

Signed

Date

Please complete, check, sign and return to
LAC2010, 26 Saltcoates Avenue, Leicester, LE47NN
For assistance please contact us on info@asiancarnival.co.uk

For office use only

Volunteer's start date

Date H&S training complete

References collected

Risk assessment

Parental consent given for under 16

Additional notes