**Volunteer Application Form**

Please complete all sections of this form (in **BLOCK CAPITALS** if by hand) and return to:

ncox-mullings@bathabbey.org

The Abbey Offices, 9 Kingston Buildings, Bath, BA1 1LT

If you have any questions or require assistance completing this form please call the Abbey Office on 01225 422462

|  |  |
| --- | --- |
| **Personal details** | |
| Full name |  |
| Address (including post code) |  |
| Home telephone number |  |
| Mobile telephone number |  |
| Email address |  |
| Date of birth\* |  |

\* Bath Abbey provides insurance cover for our volunteers. This cover varies depending on age. Please help us to keep you informed about your level of cover by providing your date of birth.

|  |  |
| --- | --- |
| **Please provide details of the person we should contact in the event of an emergency** | |
| Full name |  |
| Telephone number |  |
| Relationship to you |  |

|  |
| --- |
| **Which of Bath Abbey’s roles would you like to volunteer as?** |
|  |
| **Do you speak any additional languages?** |
|  |
| **Please list here any education, training, work or voluntary experience, specific skills or qualifications you have which may be useful in supporting the work of Bath Abbey.** |
|  |
| **What encouraged you to enquire about being a volunteer at the Abbey?** |
|  |
| **How did you hear about becoming a Bath Abbey Volunteer?** |
|  |

|  |
| --- |
| **If you have any medical conditions which would necessitate a particular course of action in a first aid situation, please note the details below.** |
|  |
| **If you have any learning needs that you would like to share with us, please do so here and let us know how we can best support you.** |
|  |
| **We welcome applications from everybody. Do you have any access needs that we would need to consider when we meet you for an informal interview?** Please detail. |
|  |

|  |  |  |
| --- | --- | --- |
| **References** | | |
| Please provide details of two people who can be contacted as referees – must NOT be a relative. | | |
|  | **Referee 1** | **Referee 2** |
| Name |  |  |
| Address |  |  |
| Telephone Number |  |  |
| Email |  |  |
| Position/Occupation |  |  |
| Relationship to you |  |  |

Data protection: Bath Abbey will keep personal details secure and will not pass them to any third party.

|  |  |  |  |
| --- | --- | --- | --- |
| **Declaration**: I declare that the statements in this form are correct. | | | |
| Signature |  | Date |  |

Bath Abbey will keep your personal information confidential. We use Better Impact, a GDPR compliant software, to store volunteer records safely and securely.

**Thank you for your interest in volunteering with Bath Abbey. We will be in touch soon to arrange an informal interview, and look forward to meeting you.**