



Green Towers - Hinckley Club 4 Young People
Volunteer Application Form

Please return completed forms to office@greentowers.co.uk

1. Personal Details Surname	Other Names:
Address: 	Tel No: Home: Mobile Email:.....
Date of Birth:	National Ins Number:
Do you own a car: YES/ NO	Have you a full current driving licence? YES/NO

Present Post/s Name & Address and business of employer(Full, Part-Time, Voluntary posts)	Post Held (Brief description)	Date Appointed

3. Previous Employment if applicable or attach C.V.	Post Held From To	Date

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4. Personal Skills & Training

Please give details of any relevant training or activities you have undertaken that would support your role as a volunteer; this may include sporting / leisure based training activity.

Activity	Date/s attended	Organised by

5. Further Details (Please continue on a separate sheet if necessary)

i.) Please tell us about relevant previous experience, particular skills and abilities you think would be helpful to you as a volunteer.

ii.) Please tell us why you are interested in voluntary work.

Two references must be provided, one of which should be from your present or most recent employer and one from a person who can speak knowledgeably about your role and relationships with young people.

Name.....	Name.....
Address	Address
.....
Email:.....	Email:
Position Held	Position Held
Tel No	Tel No

7. How did you hear about this volunteering opportunity?

8. Young Leicestershire (YL) is seeking to promote the employment of people with disabilities and will make any adjustments considered reasonable to the duties of the post applied for under the terms of the Disability Discrimination Act 1995 to accommodate a candidate with a disability.

Do you have a disability that you wish to declare? YES/NO

If you feel it appropriate , please give details :-

Disability is not a bar to employment or opportunity within YL. All disabled applicants invited for interview may be accompanied by someone of their choice and appropriate aids/adaptations made available. If appointed to a post occupational aids and adaptations to premises will be sought, where appropriate.

9. I declare that all the information submitted is true.

Date Signed