

**FOR OFFICE USE** Name of referring member of staff (if applicable) :



## APPLICATION FOR VOLUNTEERING

Please complete all sections by hand, rather than on a computer.  
If you need someone to help you fill it in, that's okay.

### Volunteering opportunities

Urban Outreach (Bolton) is a faith-based Christian charity and Company Limited by Guarantee. Established in 1990 we provide high quality support to some of the most vulnerable, disadvantaged and complex adults and young people in Bolton. A number of our projects involve food and most of our volunteering opportunities are with our Food Team.

At the end of this form we will ask you to indicate which area(s) of volunteering particularly interest you. You may end up volunteering with us on a number of projects. However, you only need to complete this form again if any of your personal details or circumstances change.

### Personal details (over 16's only)

Title: Mr / Mrs / Miss / Other (*please state*) :

Your Surname:

Your Mobile N<sup>o</sup>:

Your Forename(s):

Your Home Tel. N<sup>o</sup>:

Your Address:

Your Email address:

Your Post code:

How would you like us to keep in touch with you? It's your choice, but it would help us if you could tick all....

post

telephone

email

text

You can opt out of further communication with us at any time through our website or by emailing [admin@urbanoutreach.co.uk](mailto:admin@urbanoutreach.co.uk). Our **Privacy Policy** can be viewed on our website or otherwise by request.

Your next of kin, or who should we contact in an emergency?

Name ..... Tel. No.....

Address .....

Do you have a medical condition or disability that may affect your volunteering with us? (*please tick*)

Yes

No

If you have answered 'yes', please give details :

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.....  
.....

### Personal details (under 16's only)

Some of our volunteering opportunities are open to under 16's. If you are under 16, please complete this question for yourself. You will need your parent or guardians consent.

Your Surname:

Your Age:

Your Forename(s):

Your Address:

Post code:

Please print the name(s) of the adult(s) who will be accompanying you:  
*Accompanying adult(s) will need to sign this form and complete a separate Application Form in their own name.*

## Your skills and experience

Why do you feel you would make a good Urban Outreach volunteer? Tell us about your relevant skills, qualifications and experiences and what motivates you to volunteer with us:

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## Volunteering Opportunities

Please tick the sort of volunteering opportunities you would be interested in being considered for:

Volunteering Activity	Probable Location	Available Shifts	Please tick
Food sorting for various foodbank locations	Our 'new' building ( <i>the former Baptist Church</i> ), Snowden Street, BL1 2PU	Wednesday AM and possibly Friday AM	Yes <input type="checkbox"/> No <input type="checkbox"/>
Food sorting from harvest collections	Our 'new' building, BL1 2PU + other possible locations	Most weekdays in October until early November	Yes <input type="checkbox"/> No <input type="checkbox"/>
Collecting and moving food between locations	Driving around Bolton	Most weekdays and some evenings.	Yes <input type="checkbox"/> No <input type="checkbox"/>
'Christmas Dinner on Jesus' hamper packing	Our 'new' building, BL1 2PU + other possible locations	Up to 5 weekdays immediately before Christmas	Yes <input type="checkbox"/> No <input type="checkbox"/>
Preparing meals for the 'Winter Watch' cafe	Urban Restore Centre, Pool St. BL1 2BA	Friday mornings January - March	Yes <input type="checkbox"/> No <input type="checkbox"/>
Preparing children's lunch bags for 'Bolton Lunches'	Our 'new' building BL1 2PU + other possible locations	7.30-8.30am every weekday during school summer holidays	Yes <input type="checkbox"/> No <input type="checkbox"/>
Supporting 'Friends of Fun Food' group activities	Various venues around Bolton	As needed	Yes <input type="checkbox"/> No <input type="checkbox"/>
Cleaning and tidying premises	Our 'new' building and Urban Restore Centre	As needed during office hours	Yes <input type="checkbox"/> No <input type="checkbox"/>
Bag packing for 'Storehouse' foodbank	Urban Restore Centre, Pool St. BL1 2BA	Friday mornings	Yes <input type="checkbox"/> No <input type="checkbox"/>
Fresh food sorting for 'Storehouse' foodbank	Urban Restore Centre, Pool St. BL1 2BA	Monday afternoons	Yes <input type="checkbox"/> No <input type="checkbox"/>

From time to time, there are other opportunities. Is there anything else you feel you could help us with?

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**Reference** Please complete this section if you are over 16. Please give details of someone who can tell us whether they think you would be a good volunteer with us. We may contact them. Please choose someone who is not related to you. If you are a member of a church, please ask your church leader to be your Referee.

Full Name of your Referee:

Address:

Post Code:

Occupation if applicable:

Contact Tel. No.

Email address:

## Rehabilitation of Offenders Act 1974

Under the Rehabilitation of Offenders Act 1974 you are required to give details of convictions which are not legally spent. A conviction will not necessarily be a bar to volunteering with us, but failure to disclose any criminal conviction will disqualify you from continuing to volunteer with us, *(please tick)*:

a) **Do you have a criminal conviction which is not legally spent?** Yes  No

Many of our volunteering opportunities involve some contact with children and/or people in vulnerable circumstances. In these positions you are required to advise us of all 'unprotected' cautions and convictions even if spent. In addition, some of our volunteering positions are subject to checks from the Disclosure and Barring Service (which replaced CRB checks). You may wish to seek appropriate advice before you answer the following questions.

b) **Have you ever been convicted, cautioned or bound over in connection with a criminal offence, other than for a motoring offence not resulting in disqualification?** Yes  No

c) **Has any action ever been taken against you by a local authority in regard to a child under 18 years of age or a vulnerable adult?** Yes  No

d) **Have you ever been found guilty of violent, cruel, indecent or dishonest behaviour in any military service disciplinary proceedings?** Yes  No

If your answer is 'Yes' to any of the above questions, please provide details:

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If you are unsure as to whether this section applies to you or the volunteering positions you are interested in, you should state above: "TO BE DISCUSSED"

## General Information

a) Do you hold a full, clean current valid driving licence? *(please tick)* Yes  No

b) Do you have any driving endorsements / convictions that are not spent under the terms of the Rehabilitation of Offenders Act 1974? Yes  No

c) Do you have any possible prosecutions pending? Yes  No

d) Do you have a vehicle which you can use for volunteering which will be insured at all times for 'business' use? Yes  No

## Equality Act 2010

This Act protects people with disabilities from unlawful discrimination. Urban Outreach is committed to engaging people with disabilities. Please indicate if you have a disability to enable us to deal with your application under this scheme, *(please tick)*:

Yes  No  If YES, please state the nature of the disability:

.....  
.....

Do we need to make any special arrangements in order for you to volunteer with us?

Yes  No  If YES, please give details:

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## Relationships

Are you related to any trustee or any member of staff at Urban Outreach? *(please tick)*

Yes  No  If YES, please give details:

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.....

## Data Protection Act (1998)

By completing this form and otherwise supplying information to Urban Outreach you agree that Urban Outreach may obtain, retain and process personal data supplied by you or relating to your engagement as a volunteer including DBS vetting, training, sick absence, and as required or permitted by statute or regulation and generally as necessary under the volunteering relationship and Urban Outreach's legitimate activities.

## Declaration

**I declare that to the best of my knowledge and belief, all statements contained in this application are correct. I understand that all UOB volunteers must conduct themselves in accordance with UOB's Volunteer Handbook which I will read and familiarise myself with.**

Your signature\*:

Date:

*\*If you are under 16, your parent or guardian needs to sign*

## Returning your completed application

You should now complete the **Fairness Monitoring Form** which is attached to the foot of this form. When printing out this application form, please ensure the Fairness Form is printed on a separate sheet of paper so it can be detached.

Depending on the role you may perform for us, we may need to ask you to undertake DBS vetting. We will explain this to you if need be.

Please place your completed form in an envelope marked '*Private and Confidential*' and deliver by post or by hand to an Urban Outreach member of staff or to:

The Office Administrator, Urban Outreach, Environ House, Salop Street, Bolton. BL2 1DZ

t: 01204 385848

e: [admin@urbanoutreach.co.uk](mailto:admin@urbanoutreach.co.uk)

[www.urbanoutreach.co.uk](http://www.urbanoutreach.co.uk)

## What happens next

Once we have reviewed your application we will get back in touch with you. If there are suitable volunteering vacancies at the present time we will invite you in for a chat about it. If there are no suitable vacancies at present, we will keep your details on file (if you have given us your permission), and may get back to you at a later date.

You may be asked to complete a **Medical Questionnaire** before commencing volunteering with us.

**Fairness in Volunteering Monitoring – Strictly Confidential**

This form will be separated from your application upon receipt. The information you provide here will be used for monitoring purposes.

**Firstly, please let us know the volunteering role(s) you are interested in...**

*(please summarise in the box below)*

**How did you learn about volunteering with Urban Outreach?** *(please tick):*

Church     Twitter     Facebook     From a friend     UOB Website     email   
 Other Website  *(please state):*                      Other communication channel  *(please state):*

**How would you describe your ethnic origin?** *(please tick):*

**Asian/Asian British**    Bangladeshi .....     Indian.....     Kashmiri.....   
    Pakistani.....   
**Black/Black British:**    African.....     Caribbean.....   
**Chinese:**                      Chinese.....   
**Mixed:**                      White/Asian.....     White/Black African...     White/Indian.....   
    White/Black Caribbean   
**White:**                      British.....     European.....     Irish.....   
**Other** *(please state):* .....

**What best describes your gender?** *(please tick):*

Male                       Female

Prefer to self-describe as follows.....

**Do you identify as trans?**

Yes                       No

**What is your date of birth and age group?**

Date of birth: .....

16 – 19     20-29     30-39     40-49     50-59     60-69     70+

**What is your ability status?** *(please tick):*

No disability                       Visual impairment   
 Hearing impairment                       Mobility difficulties   
 Communication difficulties                       Mental health disability                       Learning disability

Other (e.g. epilepsy) *(please state):*.....

**What is your religion?** *(please tick):*

Buddhist                       Hindu                       Muslim   
 Jewish                       Sikh                       None

Christian                       Denomination *(please state):* .....

Other  *(please state):* .....

**Do you have caring responsibilities?** *(please tick):*

I look after children                       I help an adult with his/her daily routine   
 Both of the above                       I have no caring responsibilities

**Which best describes how you think of yourself?** *(please tick):*

Lesbian                       Bisexual   
 Heterosexual / Straight                       Gay