

Volunteering Application Form

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|--|--|-----------|--|
| Forename: | | Surname: | |
| Preferred Title: Mr/Mrs/Miss/Ms | | Tel. No: | |
| Address: | | | |
| County: | | Postcode: | |
| E-mail: | | | |
| Where did you hear about volunteering for Hope for Tomorrow Volunteer / Staff / Trustee /Family & friends/ social media/website / other: | | | |
| We have a range of different ways to support Hope for Tomorrow, whether it's supporting us in person or spreading the word from home. | | | |
| Y/N | <p>Community Champion</p> <p>As a Community Champion, you will be representing Hope for Tomorrow through a range of activities in your local community. Activities include meeting and talking to new people, groups and businesses, public speaking, accepting cheques on our behalf, banking income, distributing posters/information, collecting money, identifying, placing, and emptying collection boxes in suitable locations, identifying new locations for our clothes banks, manning stands at community events in aid of Hope for Tomorrow and selling merchandise etc.</p> <p>Location: Remotely</p> <p>Commitment: Flexible but regular and reliable</p> | | |
| Y/N | <p>Corporate Volunteer</p> <p>As a corporate volunteer, you may help support us through skill sharing, volunteering at one of our events, publicising the charity for a day or even leaflet dropping. However you'd like to get involved, we are open to hearing your ideas and welcome your support.</p> <p>Location: Remotely throughout England or joining the team at our Stonehouse office</p> <p>Commitment: Flexible but regular and reliable</p> | | |
| Y/N | <p>Event Volunteer</p> <p>As an event volunteer, you will be representing Hope for Tomorrow at some of our most exciting events across the year. Including, gala dinners, Walk of Hope, Wing Walks, Sky Dives and community events. We have a diverse range of events throughout the calendar year, including third-party events such as Rotary Fireworks and Car Shows.</p> <p>Location: Throughout England</p> <p>Time Commitment: Flexibility required for specific times and dates</p> | | |

| | | |
|---|--|--|
| Y/N | <p>Student Volunteer</p> <p>Our student volunteers help us to grow our communities right in the heart of theirs. We support you and your university in running successful fundraisers, learn more about the fundraising guidelines and health and safety requirements, and support us through clothes drives and community events and presentations. Student volunteering is a great way to build key organisational skills such as teamwork and communication. Some of our student volunteers even choose to push their limits and take part in our challenge events.</p> <p>Location: Your local area</p> <p>Time Commitment: Flexible throughout the year depending on what you'd like to get involved in.</p> | |
| <p>So that your skills and abilities can be put to best use, please complete the following:</p> | | |
| <p>Work Experience:</p> | | |
| <p>Hobbies and Interests:</p> | | |
| <p>Availability: <i>Please indicate here if you have a specific time or day that is not convenient for you to volunteer.</i></p> | | |
| <p>Please give two independent referees, who you have known for more than three years, who would be willing to supply a character reference. (These must not be family members)</p> | | |
| <p>Name:</p> <p>Address:</p> <p>County</p> <p>Postcode:</p> <p>Tel. no:</p> | <p>Name:</p> <p>Address:</p> <p>County</p> <p>Postcode:</p> <p>Tel. no:</p> | |
| <p>Some of our roles require a DBS check to take place, do you consent to this happening?</p> | <p>Yes / No</p> | |

**Thank you for your application to volunteer at Hope for Tomorrow.
We couldn't do what we do without the help of our fantastic team of
volunteers.**

Emergency Contact Details & Medical Information

| | |
|---|-------------------------------|
| Name of Emergency Contact (1 st next of kin): | Relationship to you: |
| Address: | Contact telephone number: |
| County: | Home: |
| Postcode: | Business: |
| Name of alternative Emergency Contact (2 nd next of kin): | Relationship to you: |
| Address: | Contact telephone number: |
| County: | Home: |
| Postcode: | Business: |
| Mobile: | Mobile: |
| Medical Information | |
| Do you have any medical conditions or allergies? | Yes / No (please indicate) |
| If yes, please give details | |
| Age: 18 -20 () 21-30 () 31-40 () 41-50 () 51-60 () 61-70 () 71-80 () 81+ () | |

Signature:

Date:

NB: The information in this form is confidential and will only be used in case of an emergency.

Volunteer Confidentiality Agreement

During your voluntary work at Hope for Tomorrow, you will often have access to and be entrusted with confidential information concerning the Charity, not limited to its Finances, Affairs, Associates and Supporters. Acceptance by signing this Confidentiality Statement as part of your volunteer agreement is a requirement for working with Hope for Tomorrow. Nonadherence to the terms herein will immediately terminate your temporary or volunteer work with the Charity.

You shall not (except where requested to by your manager) divulge by any means, be it verbal, written, email or other, to any person or otherwise make use of (and shall use your best endeavours to prevent the publication or disclosure of) any confidential information concerning the operation of Hope for Tomorrow as detailed above.

All notes and memoranda and copies thereof of any confidential information concerning the operation of Hope for Tomorrow, which shall be acquired, received or made by you during your work, shall be the property of Hope for Tomorrow.

You will not remove any documents (whether physically or by electronic transfer) or tangible items belonging to Hope for Tomorrow, its Associates or Supporters that contain confidential information from Charity’s premises at any time without the prior authority of Senior Management. You shall not copy or delete or allow others to copy or delete the contents of any document, computer disk, tape, email, or other tangible item containing confidential information.

Confidential information may include but is not limited to:

- Personal information about individuals who are Trustees, Patrons or otherwise involved in the activities organised by Hope for Tomorrow
- Any information about the Charity’s Donors and Supporters
- Information about the internal operations of Hope for Tomorrow
- Personal information about Staff or Volunteers working with Hope for Tomorrow.

Do not disclose information – especially over the telephone or via email – unless you are sure that you know to whom you are disclosing it.

Treat all information as confidential unless you know that it is intended by Hope for Tomorrow to be made public. If you are ever in doubt about whether to disclose information or not, do not guess. Withhold the information while you check with a manager on whether the disclosure is appropriate.

Your confidentiality obligations continue to apply indefinitely after you have stopped volunteering for Hope for Tomorrow.

As a Hope for Tomorrow volunteer, you represent the charity and as such you are required to always act professionally with honesty and integrity. Failure to do this will result in the immediate termination as a volunteer from Hope for Tomorrow.

I have read and understand the above Confidentiality Statement, fully accept my responsibilities, and understand that failure to adhere to the terms set out herein, will terminate my volunteer work with the Charity immediately.

Full Name:

Signature:

Date: