Early Help Volunteer application form

# Data protection statement

Walsall Council will use this information to evaluate your application for the role of Early Help Volunteer.

We will not use this information for any other purpose than to evaluate your information regarding volunteer roles.

We would like to keep your information on secure file, to be accessed by approved personnel at future dates so we can contact you to discuss future volunteer opportunities within the Early Help service or other Walsall Council service areas. We would also like to share your information with our partners working with us to support us in further development of volunteer roles across the council. You can opt in or out of information sharing below.

**I consent for my information to be kept on file for future contact about volunteer roles with Walsall Council**

Yes[ ]  No[ ]

**I consent for my information to be shared with Walsall Council partners working with us on the development of volunteer roles**

Yes[ ]  No[ ]

You can find out about how we work to keep your information safe on our [data protection webpage](https://go.walsall.gov.uk/your-council/data-protection).

# Introduction

You should complete all the sections on the form. If a section isn’t relevant, type or write ‘N/A’ (not applicable).

When you’ve completed it, save a copy and attach it to an email. Send your application to:

EarlyHelpVolunteers@walsall.gov.uk

# About you

**Your name** Click or tap here to enter text.

**Your age** Choose an item.

**Your gender** Female [ ]  Male[ ]  I don’t want to answer this question[ ]

**Your home address and postcode** Click or tap here to enter text.

**Your daytime phone number** Click or tap here to enter text.

**Your email address** Click or tap here to enter text.

**Do you have access to a car?**

Yes [ ]  No [ ]  Sometimes [ ]

**Do you have access to a computer/laptop and internet?**

Yes [ ]  No [ ]  Sometimes [ ]

**Are you currently in education/further education or studying?**

Yes [ ]  No [ ]

If you answered yes, please tell us about your studies/education:

Click or tap here to enter text.

**Are you related to a current or former Walsall Council staff member?**

Yes [ ]  No [ ]

If you answered ‘yes’, please tell us their name, the service area they work in, and how you’re related to them:

Click or tap here to enter text.

**Do you need any additional support from us to help you in the volunteer role?**

Yes [ ]  No [ ]

If you answered yes, please tell us what you would need to be able to undertake the role. **For example, extra equipment:**

Click or tap here to enter text.

# Permission to volunteer in the UK

**Do you need a permit or any other kind of document to show that you have necessary permission to volunteer in the UK?**

Yes [ ]  No [ ]

**Do you have the necessary documentation to enable you to volunteer in the UK?**

Yes [ ]  No [ ]

If you answered ‘yes’ to either of these questions, please give more details below:

Click or tap here to enter text.

# Your availability

**What days/times are you available to carry out volunteering duties?**

**Select as many options as you want:**

Monday: Morning[ ]  Afternoon[ ]  Evening[ ]

Tuesday: Morning[ ]  Afternoon[ ]  Evening[ ]

Wednesday: Morning[ ]  Afternoon[ ]  Evening[ ]

Thursday: Morning[ ]  Afternoon[ ]  Evening[ ]

Friday: Morning[ ]  Afternoon[ ]  Evening[ ]

Saturday: Morning[ ]  Afternoon[ ]  Evening[ ]

Sunday: Morning[ ]  Afternoon[ ]  Evening[ ]

**Are you available during school holidays?**

Yes [ ]  No [ ]

**Are you interested in supporting our school holiday activities and groups?**

Yes [ ]  No [ ]

# Your areas of interest

**What area of volunteering would you like to focus on?**

**The role description will help you to decide. You can select as many options as you want:**

Family support [ ]

Early Years support [ ]

SEND family support [ ]

Healthy lifestyle [ ]

Supporting or running parenting groups [ ]

Any of the above [ ]

Need more information before deciding [ ]

# ****Your experience****

**Do you currently work at Walsall Council, or have you in the past?**

Yes [ ]  No [ ]

**Do you currently volunteer with Walsall Council, or have you in the past?**

Yes [ ]  No [ ]

If you answered yes to either of the questions above, please tell us about your experience.

Click or tap here to enter text.

**Do you currently volunteer with another organisation, or have you in the past?**

Yes [ ]  No [ ]

If you answered yes, please tell us about your experience (current or past). Where did you volunteer? Why did you leave (if applicable)?

Click or tap here to enter text.

# Supporting statement

Tell us, in your own words, why you want to apply for this role.

Let us know about your skills, knowledge and experience (this can include life experience) that you can bring to the role.

Click or tap here to enter text.

# References

**Are you able to provide a character reference?** Yes [ ]  No[ ]

If yes, tell us about your referees

## Referee 1

**Name** Click or tap here to enter text.

**Phone number** Click or tap here to enter text.

**Email address** Click or tap here to enter text.

**Relationship to you** Choose an item.

## Referee 2

**Name** Click or tap here to enter text.

**Phone number** Click or tap here to enter text.

**Email address** Click or tap here to enter text.

**Relationship to you** Choose an item.

# ****Declaration****

To my knowledge the information I have included in this form is correct.

I understand that if I am appointed and this information is found to be inaccurate this may affect my continued involvement with Walsall Council.

**Your name** Click or tap here to enter text.

# Next step

Save a copy of your completed form, attach it to an email and send it to:

EarlyHelpVolunteers@walsall.gov.uk