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VOLUNTEER REGISTRATION

We are delighted that you have expressed an interest in becoming a volunteer with The ManKind Initiative. To enable us to offer you with the correct level of support, advice, information and opportunity please take a moment to complete this form. The details required are straightforward however, if at any point you have any questions please do not hesitate to contact us.

PERSONAL DETAILS	
Title	Forenames
Surname	
Previous names used (IE. Maiden Names) Please include date changed	
Address	
Postcode	
How Long have you lived at this address (MM/YY) <i>If you have lived at this address for less than 5 years please enclosed a separate paper with 5 years address including the dates</i>	
CONTACT DETAILS	
Daytime Number	Mobile Number
Evening Number	Email Address
DOB	Place of Birth
Gender	Male Female
Nationality	Religion <i>(if comfortable to provide)</i>
Do you have any criminal convictions other than motor offences? Yes / No	
<i>If "yes" please provide details of the offences and dates</i>	

SKILLS & VOLUNTEERING**Occupation****NI Number***(office use only for CRB purposes)***If you have provided a work contact number is it ok for us to use it?****Yes / No****Please outline specific skills/interests you have to offer or would like to provide.****Please tell us why would you like to become a volunteer with The ManKind Initiative?****Please tell us what kind of opportunity you are interested in?****PROMOTING THE CHARITY****YES / NO**

By way of distributing promotional leaflets and posters

INFORMATION**YES / NO**

By way of providing localized information for any projects

RESEARCH**YES / NO**

Involvement of any ongoing projects

FUNDRAISING**YES / NO**

Participating or organising events on behalf of the Charity

ADVOCATES**YES / NO**

Representing the Charity by attending local Domestic Violence Forum meetings and other events

SPECIALIST PANEL**YES / NO**

Are you a legal professional, police officer, housing officer, health worker or have experience in helping victims? We aim to set up an advisory panel to consult on individual cases where necessary.

Have you done any voluntary work before? Yes / No

If "yes" please provide details of the organization and role you performed

Please tell us what you would like to gain from volunteering.

Please tell us what time you can give?

Please tell us which age bracket you fit into.

17-25	26-35	36-45	46-55	56-65	66-75	75 +

Do you have any experience with victims of Domestic Violence or Abuse? Yes / No

If you are comfortable offering any details please use the section below

OTHER INFORMATION

Are you in good health? Yes / No

Are you registered with a disability? Yes / No

Please provide details of any disability/medication that may affect you as a volunteer?
This question will not restrict or hinder your application – it will allow us to match you with an appropriate opportunity.

Do you have access to a vehicle? Yes / No

Would you be willing to use it? Yes / No

Please tell us how you heard about The ManKind Initiative?

Some of our volunteer opportunities require full training, we try to reduce the distance by arranging a more localized meeting with you, however this is not always possible:

Are you willing to attend a training session? Yes / No

Are you willing to travel, if necessary? Yes / No

Please note reasonable travel expenses may be considered.

CHARACTER REFERENCES.

Please provide details of two people (not relations) who could provide a character reference for you. Contact to your referees will be by writing in confidence and may be followed up with a telephone call.

Reference One

Reference Two

Name

Name

Address

Address

Postcode

Postcode

Telephone Number

Telephone Number

Data Protection

- ❖ We will not provide any of your details to a third party without your permission.
- ❖ You have the right to see any information about you that we hold in a computer or paper retrieval system, to change it, and to have it changed or removed.
- ❖ We may compile statistics from time to time, but these will never include references to a particular individual. Where this is the case, processing, whether by means of computer or otherwise, will take place in accordance with the provision of the Data Protection Acts 1984 and 1998. By signing this form you will be providing your consent to these uses.
- ❖ We may include you in our mailing or emailing list but we will never sell or give these lists to a third party.

What we do with the information you give us:

- ❖ We will hold your information confidentially and use it to try and match you with suitable volunteering opportunities.

Opportunities

- ❖ All of our opportunities require copies of Personal Identification to support your application.
- ❖ Due to the nature of the work The ManKind Initiative focuses on, for some of our opportunities it is a requirement that a full CRB is performed. The check is performed by a verified agency and should this be required for the opportunity you have selected, the Data Company used will firstly send you a form to authorize the release of such personal information to sign and return.
- ❖ The ManKind Initiative will make every effort to match your application to the closest opportunity available whilst keeping in mind your length of time and commitment you are able to offer.
- ❖ Please note that a criminal record will not necessarily prevent you from working as a volunteer with us. However, because of the vulnerability of some of the people with whom we work, we reserve the right to conduct such checks as necessary.

Supporting Documents

- ❖ **Please forward a photocopy of one form of Identification and one photocopy of a proof of address along with a photocopy of you National Insurance Card (3 proofs in total)**
- ❖ **Identification documents accepted – Passport, Driving Licence**
- ❖ **Proof of address accepted – Utility bill, bank statement, mobile statement, all within the last 3 months.**
- ❖ **A copy of your National Insurance Card.**

DECLARATION

I declare that to the best of my knowledge and belief, all particulars I have given are complete and true. I understand that any false declaration or misleading statement or any significant omission may disqualify me from volunteering and render me liable for dismissal. I understand that any offer is subject to satisfactory references and a probationary period and where appropriate satisfactory Criminal Record check performed by the Criminal Records Bureau. I understand the CRB is performed as I may be directly working with vulnerable people. I understand that I will need to authorize a criminal records check from the criminal records bureau before the appointment is confirmed (where appropriate)

Signature:

Date: