**VOLUNTEERING WITH MIND IN BRADFORD**

Thank you for your interest in volunteering at Mind. This form is to find out a little bit more about you and why you want to become a Volunteer.

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| **ESSENTIAL CLIENT INFORMATION** |
| **FORENAME(S)** |  |
| **SURNAME** |  |
| **DATE OF BIRTH** |  |
| **EMAIL** |  |
| **HOME TELEPHONE** |  |
| **MOBILE TELEPHONE** |  |
| **ADDRESS LINE 1** |  |
| **ADDRESS LINE 2** |  |
| **TOWN/CITY** |  |
| **COUNTY** |  |
| **POST CODE** |  |

*The information you provide us on the following pages will help us in the next stage of your application, so please give us as much detail as possible.*

**1. Have you been a volunteer before? YES NO**

**If yes, please provide a brief description of the role and the organisation you volunteered for:**

**2. If you have a visual impairment or a disability that may require additional support, please indicate here and we will discuss this with you.**

**3. Please tell us about any skills and experience that might be relevant to your work as a volunteer with Mind. E.g. Financial, Listening, Interpersonal.**

***For Translator role include languages you speak here.***

**4. Please provide details of your interests and hobbies?**

**5. How do you hope to benefit from your time at Mind in Bradford and how will you contribute?**

**Further Information:**

All posts are subject to a three month probationary period.

After 12 months, your position will come to an end, however you will be able to re-apply.

**REFERENCES**

Please tell us what days and times you would be available to wor

**Please can you give two character references; these should be people who know you well and have done so for at least the past two years (excluding family members).**

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|  | **FIRST REFERENCE DETAILS:** | **SECOND REFERENCE DETAILS:** |
| **RELATIONSHIP TO YOU** |  |  |
| **FULL NAME** |  |  |
| **JOB TITLE** |  |  |
| **EMAIL**  |  |  |
| **PHONE NUMBER**  |  |  |

**Your Signature: ………………………………………….....................................**

**Date: ……………………………………………………………………………..**

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| --- |
| **Please tell us what days & time you could be available to volunteer:****Which role would you prefer, if successful?****Thank you for completing this form.**Please email your completed application form to Volunteering@mindinbradford.org.uk, post or drop in to:*Mind in Bradford, Kenburgh House, 28 Manor Row, Bradford, BD1 4QU*Once complete, this form will contain personal and sensitive information about you and your referee. ***Email cannot be guaranteed as secure, as email messages can be deliberately intercepted or accidentally misdirected.*** |