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Description automatically generated]()

**Volunteer Application Form**

|  |  |  |
| --- | --- | --- |
| Full Name |  | |
| Current Address |  | |
| Town / City |  | |
| Post Code |  | Are you M / F |
| Contact No |  | |
| email address |  | |
| Date of Birth |  | |
|  |  | |
| Do you have a DBS Certificate (if yes, please attach a copy) Y / N \*\* | | |
| Do you have a Criminal Record or convictions pending ? Y / N | | |
| Are you a qualified First Aider (if yes, please attach a copy of your Certificate) Y / N \*\* | | |
| How did you hear about us ? |  | |
| Do you have any special skills you can bring to Boro Angels |  | |
| Emergency Contact Info | Name : | |
| Number : | |
| Relationship to you : | |
|  | Address : | |
|  |  | |
|  | Post Code : | |
| Please supply details of 2 Referees (not relatives) | | |
| Name |  | |
| Contact No |  | |
| Email |  | |
| Company |  | |
| How do they know you |  | |
|  |  | |
| Name |  | |
| Contact No |  | |
| Email |  | |
| Company |  | |
| How they do know you |  | |

**\*\* - for accepted Volunteer Applications ONLY**

I hereby declare the above information to be true and correct, I understand that by giving false information my application may become invalid

Signed : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Boro Angels – Registered Charity No. 1144832***

***Registered Office : St. Barnabas Church Office. 1a St. Barnabus Rd, Linthorpe, Middlesbrough. TS5 6JR***