Volunteer Application Form

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| **Your details:** | | **Durham County Council Contact:**  **Name: Lydia Crabtree**  **Job Title: Volunteer Programme Coordinator**  **Telephone number: 03000 264895**  **Email: Lydia.Crabtree@durham.gov.uk** |
| **Title:** | |
| **Name:** | |
| **Address:** | | |
| **Contact Number:** | **Date of birth:** | |
| **Email Address:** | | **Emergency contact details:**  **Name:**  **Address:**  **Contact Number:**  **Email Address:** |
| **Which volunteer roles are you interested in?** | |
| **Where would like to volunteer?**  **I am happy to work anywhere in the county**  **I only want to work in my local area**  **(Please specify)** | |

**Equal Opportunities:**

We are committed to making reasonable adjustments for everyone wishing to take part in volunteering activities. If you consider yourself to have a disability, additional needs, or a medical condition, please can you state below:

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Do you have any spent or unspent criminal convictions? Yes No

**Employment status:**

Employed Unemployed Retired Student

**Reasons for volunteering**:

Skills/Experience Qualifications Make good use of time Social Wellbeing

Give something back to community Mental Wellbeing Physical Wellbeing

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| **Hours/ Holidays and Absences** |
| If you are unable to attend your planned volunteering session, please provide as much notice as possible. |
| **Confidentiality** |
| Maintaining confidentiality of sensitive information is essential and all volunteers are under an obligation to comply with General Data Protection Regulations. Volunteers are required to seek guidance and advice from their line manager before disclosing any information. Under no circumstances should you use council information or facilities for unauthorised personal use, improper or commercial gain or for fraudulent or malicious activities. By signing this form, you agree to ensure that you save, share, and retain information in line with corporate policies and guidelines and treat all information you receive in the course of your volunteer role as confidential to the Council. |
| **Risk Assessment** |
| Volunteers must be prepared to regularly read, sign, and adhere to risk assessments carried out by Parks and Countryside staff. They must also be prepared to follow all health and safety guidance provided by staff, including tool box talks and safe systems of work. |
| **Ending the Volunteer Agreement** |
| This agreement can be ended by you or DCC Parks and Countryside service at any time and without notice, but, unless there is an emergency or misconduct, we will aim to provide at least 2 weeks’ notice. |
| **Brief expectations of a volunteer** |
| * behave reasonably and not bring the programme into potential or actual disrepute. * declare any conflict of interest. * report any issues that cause concern both for yourself and on behalf of others. * respect the confidentiality, equality and diversity of clients, volunteers, members of the public and other employees. * attend training and be clear on policies and procedures that relate to your volunteer role. * be clear about the time commitment you can offer, be reliable and arrive on time. * Inform supervisor of any changes to personal disabilities, needs and medical conditions. |
| **Data Protection and Fair Processing** |
| The informationthat you have provided in this application form will be held in a ‘Volunteer Database’. The information will be used by Durham County Council for the below purposes only:  **Purpose 1** – To produce reports for statistical and work programming purposes.  **Purpose 2** – Toprovide you with information that may be beneficial to your volunteering role.  **Purpose 3 –** To contact, and consult you, regarding volunteer opportunities and development initiatives by Durham County Council and its partner organisations.  **Purpose 4 –** To promote Durham County Council, its area, its work and future events staged or managed by the council.  To find out more about how Durham County Council collect, use, share and retain your personal data visit: **www.durham.gov.uk/dataprivacy**.  Please sign the declaration below indicating that you give consent for the processing of your information, that you have freely given, for the purposes stated within this application.  **Print Name …………………………………………… Signature…………………………………………….**  **Date…………………………………………….** |