



Himalayan Women &
Children's Foundation

“See the World and Lend a Hand”

Volunteer Application Form 2010

This form should be used by anyone wishing to volunteers

Personal details

Full name	<input type="text"/>		
Address (Including Postcode)	<input type="text"/>		
Passport #	<input type="text"/>	Issue Date	<input type="text"/>
Telephone (Including STD Code)	<input type="text"/>	Contact name (For use in emergency only)	<input type="text"/>
Mobile	<input type="text"/>	Contact telephone (Including STD code)	<input type="text"/>
Email	<input type="text"/>	Contact mobile	<input type="text"/>

Application information

Position applied for (If specified)	<input type="text"/>							
Your availability (Please tick as appropriate)	Mon am pm	Tues am pm	Weds am pm	Thurs am pm	Fri am pm	Sat am pm	Sun am pm	Varies
	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
Experience, learning and skills	<input type="text"/>							
Information to support your application								
<i>Please continue on a separate sheet if you wish</i>								
Do you have any links to the second hand trade? If yes, please specify	<input type="text"/>							
<i>Many of our volunteer positions involve working in HWCF dental or medical clinic and school. Declaring any links can help prevent this becoming a conflict of interest</i>								yes no <input type="checkbox"/> <input type="checkbox"/>
Rehabilitation of Offenders Act 1974: Do you have any unspent convictions? If yes, please specify	<input type="text"/>							
<i>Please note that a conviction will not necessarily exclude you from volunteering with HWCF, but will be taken into account when assessing your suitability</i>								yes no <input type="checkbox"/> <input type="checkbox"/>

References

If you have worked in the past five years, at least one reference should be obtained from your last employer. If not, give the names of people who know you well.

Referee one

Name

Address

Tel.

In what capacity do you know referee one?

Referee two

Name

Address

Tel.

In what capacity do you know referee two?

Equal Opportunities Monitoring

The information in this section is used only for the purposes of ensuring the effectiveness of our Equal Opportunities Policy, which is available on request.

Gender F M **Age group** <20 21-30 31-50 51-60 61-70 71+

How would you describe yourself?

These categories of ethnic origin are recommended by the Commission for Racial Equality as the most appropriate for monitoring the USA. We recognise that the specific categories may not be appropriate for everyone. If this is the case please use the last box

Asian or Asian British:

Indian
Pakistani
Bangladeshi
Any other Asian background
(Please specify)

White:

White British
White Irish
Any other white background
(Please specify)

Black or Black British:

Black Caribbean
Black African
Any other Black background
(Please specify)

Mixed:

Chinese or other ethnic group:

Chinese
Any other Ethnic background
(please specify)

Do you consider yourself to have a disability/impairment?

yes no

If yes, please specify

If yes, do you have any particular needs in relation your disability/impairment?

yes no

Please discuss these with the Manager.

Declaration

I understand that any offer of volunteering with HWCF is subject to satisfactory references, and binding in honour only.

In accordance with the 1998 Data Protection Act, I agree that Oxfam may hold and use personal information about me for volunteering reasons and to keep in touch with me. This information, including that contained in this form can be stored on both manual and computer files. It will be held securely and only accessed by authorised personnel.

Signature

Date