**MK-ACT VOLUNTEER PROJECT
Volunteer Application Form**

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| Personal Details |
| Name: |  |
| Address: |   Post Code: |
| Phone: |   OK to leave Message/Text? Y/N |
| Email: |  |
| Date of Birth:  |  Ethnicity: |
| Availability:Please list times where possible. |

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| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Mon | Tues | Weds | Thurs | Fri | Sat | Sun |
| A.M |  |  |  |  |  |  |  |
| P.M |  |  |  |  |  |  |  |
| Eve |  |  |  |  |  |  |  |

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| Do you have any regular commitments or responsibilities that may prevent you from being flexible or consistent in your availability that we may need to take into account? |
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| What attracts you at this time to offer a voluntary commitment to a domestic abuse service? |
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| What skills or experience do you have which you think may be helpful when volunteering with MK-ACT? Do you have previous voluntary experience, training, work experience, personal experience, other languages spoken etc. |
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| What hobbies, talents, practical skills or interests do you have, that you think may be helpful in volunteering with MK-ACT service users?  |
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| What do you hope to gain personally from volunteering with MK-ACT? |
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| Please try to briefly respond to the following questions: They are not designed to catch you out, but to assess your level of awareness in order to ensure that training and supervision meet your needs.  |
| Why do you think women stay in relationships with abusive men? |
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| Why do you think that men are violent towards their partners? |
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| What do you think you may need to consider when working with people from a different background from yourself? (E.g. different ethnic background, different sexuality etc.) |
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| **References**Applicants are required to provide the names and contact details of two people who can provide a personal character reference in writing. These people must not be a spouse, partner or relative and should have known you for at least 1 year in a professional or personal capacity. References should reflect on your character and suitability to work with vulnerable people. |
| **Referee 1.Name:****Address:****Telephone/Mobile:****E-mail:How long have you known this person?:****In what capacity do you know this person?:****Referee 2.Name:****Address:****Telephone/Mobile:****E-mail:How long have you known this person?:****In what capacity do you know this person?:** |
| **Criminal Records Bureau Check**Applicants are required to complete an Enhanced Criminal Records Bureau (CRB) check. Previous convictions will not constitute an automatic bar to consideration of your application. However, in the event of an applicant being selected, discovery of failure to disclose previous convictions or pending court appearances could result in being asked to leave the project. |
| **Confidentiality**Applicants should be aware that the safety of clients is paramount and that an understanding of the need for confidentiality is essential to the role. You will be required to sign a confidentiality agreement and understanding of the issues will be covered in the volunteer training and selection. If you are knowingly aware that you have any relationship or connection with recent or current service users or have been a service user yourself, you will be required to disclose this at selection. This will not automatically bar you from being selected but may need to be discussed to ensure appropriate boundaries are maintained.  |
| I wish to be considered as a volunteer for MK-ACT. I am willing to work within the aims and principles of MK-ACT. |
| Signed: Date: |