

VOLUNTEER APPLICATION STAGE 2

No one can do everything, but everyone can do something...



Further to your application to become a Reuben's Retreat volunteer, please provide the details of 2 independent referees, either previous employers or ideally someone in a professional capacity who has known you for at least two years. References will be sought using the information you provide below prior to commencing your volunteer role. Please also give details of someone we can contact should there be an emergency whilst you're volunteering for Reuben's Retreat. If you are unable to provide referees or have any queries, please do not hesitate to contact us to discuss further.

Title & full name:	
Daytime contact no.:	
Evening contact no.:	

Referee 1 name:	
Job title:	
Company name:	
Address & postcode:	
Telephone no.:	
Email address:	
What is your relationship with this person and how long have you known them?	

Referee 2 name:	
Job title:	
Company name:	
Address & postcode:	
Telephone no.:	
Email address:	
What is your relationship with this person and how long have you known them?	

Emergency contact name:	
Address & postcode:	
Daytime contact no.:	
Evening contact no.:	

Declaration

I declare that the information I have given in this application form is correct and to the best of my knowledge. I also give my permission for Reuben's Retreat to seek references to support my application to become a volunteer.

Signature:..... Date:

Please return your completed form to:
Reuben's Retreat, Park Crescent, Glossop, SK13 7BQ

Alternatively, please email to:
volunteers@reubensretreat.org

FOR OFFICIAL USE ONLY	Internal reference:		Date received:	
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EQUALITY & DIVERSITY MONITORING

No one can do everything, but everyone can do something...



Reuben's Retreat recognises the benefits of a diverse community of beneficiaries, volunteers, staff and supporters, and we are committed to being an inclusive organisation where everyone is treated with respect, dignity and where there is equal opportunity for all. Whilst we ask you complete the following information you are not obliged to do so; the answers you do provide will be treated anonymous and stored confidentially and securely.

Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Rather not say				
Age:	<input type="checkbox"/> Under 25	<input type="checkbox"/> 26-35	<input type="checkbox"/> 36-45	<input type="checkbox"/> 46-55	<input type="checkbox"/> 56-65	<input type="checkbox"/> 66 or over	<input type="checkbox"/> Rather not say
Please state what you consider your ethnic origin to be: <i>Ethnicity is distinct from nationality and the categories below are based on the 2001 Census</i>							
<input type="checkbox"/> Indian	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Other _____				
<input type="checkbox"/> Caribbean	<input type="checkbox"/> African	<input type="checkbox"/> Other _____					
<input type="checkbox"/> Chinese	<input type="checkbox"/> Other _____						
<input type="checkbox"/> White & black Caribbean	<input type="checkbox"/> White & black African	<input type="checkbox"/> White & Asian	<input type="checkbox"/> Other _____				
<input type="checkbox"/> English	<input type="checkbox"/> Irish	<input type="checkbox"/> Scottish	<input type="checkbox"/> Welsh	<input type="checkbox"/> Other _____			
<input type="checkbox"/> Rather not say							
Faith: <i>Which group below do you most identify with?</i>							
<input type="checkbox"/> Buddhist	<input type="checkbox"/> Christian	<input type="checkbox"/> Hindu	<input type="checkbox"/> Jewish				
<input type="checkbox"/> Muslim	<input type="checkbox"/> Sikh	<input type="checkbox"/> Rather not say	<input type="checkbox"/> Other _____				
Do you consider yourself to have a disability?: <i>The Disability Discrimination Act 1995 (DDA) defines a person as disabled if they have a physical or mental impairment which has a substantial and long term (i.e. has lasted or is expected to last at least 12 months) adverse effect on one's ability to carry out normal day-to-day activities.</i>							
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Rather not say							
Would you consider yourself to be:							
<input type="checkbox"/> Bisexual	<input type="checkbox"/> Gay	<input type="checkbox"/> Heterosexual	<input type="checkbox"/> Lesbian	<input type="checkbox"/> Rather not say			
Are you currently:							
<input type="checkbox"/> Employed	<input type="checkbox"/> Unemployed	<input type="checkbox"/> Full-time parent or carer	<input type="checkbox"/> Retired	<input type="checkbox"/> Student/Adult student	<input type="checkbox"/> Rather not say		
How many children (aged 16 or under) do you have living in your household?:							
What are the first 3 digits of your postcode?:							

Keeping Volunteering Voluntary statement

As a charity we know the value of volunteering - volunteering means people independently choosing to give their time freely to help others and make the world a better place. Workfare schemes force unemployed people to carry out unpaid work or face benefit sanctions that can cause hardship and destitution. We believe in keeping volunteering voluntary and will not participate or support your involvement in government workfare schemes.

Under the terms of the Data Protection Act and the Data Protection Directive this information will be treated in a secure and confidential manner. Reuben's Retreat may be required to give some of this information – only where relevant and appropriate - to the bodies responsible for regulating and/or funding Reuben's Retreat.

Please return your completed form to:
Reuben's Retreat, Park Crescent, Glossop, SK13 7BQ

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