

Volunteer registration form

Contact details

| | |
|-------------------------|--|
| Full name | |
| Street name and number | |
| Town | |
| Post code | |
| Phone | |
| Mobile | |
| Email | |
| Emergency contact name | |
| Emergency contact phone | |

Volunteer groups

Which council service would you like to volunteer for? (for example, Harlow Museum, Walled Gardens, Leah Manning Centre, Pets' Corner, Town Park, Playhouse, Parndon Wood, Housing)

| |
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| |
|--|

Personal information

Tell us about any particular experience or skills that you would bring to the group as a volunteer? If you are already performing volunteer duties please indicate the type of duties you currently do.

| | |
|---------------------------------|--|
| Experience and skills | |
| Activities currently performing | |

Support you would need and any medical conditions

We want to support volunteers from all sections of the community at every stage. Use the space below to tell us about your own specific needs, if any. These could relate to physical or mental health, mobility, religion, culture or anything else you feel it's important for us to know about.

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Do you have any medical conditions that may affect the type of work you can safely do as a volunteer? For example, a back injury or heart condition that restricts manual labour capacity. If yes, provide details in space below to help us review any reasonable adjustments we'd need to make for you to undertake the voluntary work.

| | | |
|----|-----|-------------|
| No | Yes | Yes details |
|----|-----|-------------|

Do you have any additional care and support needs that we should be aware of?

| | | |
|----|-----|-------------|
| No | Yes | Yes details |
|----|-----|-------------|

Are you prescribed any medicines which we would need to be aware of in relation to you carrying out volunteer tasks and duties (an inhaler, for example)?

| | | |
|----|-----|-------------|
| No | Yes | Yes details |
|----|-----|-------------|

Do you have any allergies? If so, do you have your medication with you?

| | | |
|----|-----|-------------|
| No | Yes | Yes details |
|----|-----|-------------|

Availability

Please indicate your availability in the boxes below:

| Time | Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----------|-----|-----|-----|-----|-----|-----|-----|
| Morning | | | | | | | |
| Afternoon | | | | | | | |
| Evening | | | | | | | |

Council commitment

The council values the contribution of volunteers and will ensure that a safe work environment, necessary protective equipment and comprehensive volunteer management systems are provided at all times. Volunteers performing sanctioned group duties will have the coverage of the council's public liability and limited personal accident insurance policies.

Volunteer commitment

I agree to conduct myself in a manner that is safe for me, other volunteers and council staff. I shall accept the guidance of the council appointed supervisor and participate in any technical or safety training that is required. I shall notify my supervisor of any change to my ability to act as a volunteer.

| | |
|-----------|--|
| Signature | |
| Date | |

Declaration

I confirm the information given in this application is correct to the best of my knowledge. I accept that if I give false information I will not be allowed to continue volunteering for Harlow Council.

I understand that this information will be kept in accordance with data protection legislation. I confirm I have read and understood the terms that explain how my information may be used.

| | |
|-----------|--|
| Signature | |
| Date | |

Sending your form

Please email your completed form to: volunteering@harlow.gov.uk

You can also post this form to:

Becci Court, Harlow Council, Civic Centre, The Water Gardens, Harlow, Essex, CM20 1WG

What happens next

Your application will be sent to the volunteer manager for the role for which you have applied. They will contact you to arrange an informal chat and may ask you to bring identification documents.

If you and the volunteer manager agree you would like to continue with the application, you may be asked to carry out a trial volunteer session or training.

Once complete, the volunteer manager will agree a start date and ask you to sign a volunteer agreement – you can then begin your volunteer role.

How we will use your information

We will use your information to provide the service requested. We may share your personal data between our services and with partner organisations, such as government bodies and the police. We will do so when it is of benefit to you, or required by law, or to prevent or detect fraud. To find out more, go to Harlow Council privacy notice

<https://www.harlow.gov.uk/your-council/accessing-information/privacy-notice>

Office use

| | |
|--------------------|--|
| Recruiting manager | |
| Start date | |
| DBS details | |