## **Newton Abbot Community Interest Company**

Volunteer application form – Ukraine Support Volunteers



Name: Click	or tap here to er	nter text.	
Address: Cli	ick or tap here to	enter text.	
Telephone N	o.: Click or tap h	ere to enter tex	t.
Mobile No.:	Click or tap here	to enter text.	
Email: Click o	r tap here to ente	er text.	
	the role/s you		in: guage support □
Times availal Monday: Tuesday: Wednesday: Thursday: Friday:	AM  AM  AM  AM  AM  AM  AM  AM  AM  AM	r (tick all that PM     PM     PM     PM     PM     PM     PM	apply):  Evening   Evening   Evening   Evening   Evening   Evening   Evening
Saturday: Sunday:	AM □ AM □	PM □ PM □	Evening   Evening

Why would you like to volunteer with us?

Click or tap here to enter text.

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Please list any relevant skills or any previous experience of volunteering: Click or tap here to enter text.

Please list any medical or health conditions you feel we should be aware of in relation to the tasks you will be carrying out as part of volunteering:

Click or tap here to enter text.

Please list details of an emergency contact name and telephone number for someone we can get in touch with in case of an unlikely emergency when you are on-site at the organisation.

Click or tap here to enter text.

## **Agreement and consent:**

Information provided on this form will be stored confidentially and securely in line with Data Protection legislation.

I confirm:

- the information I have given above is correct
- I give permission for this form to be used and information provided used to contact me and keep stored securely for use by project coordinator and Newton Abbot CIC
- •I understand that I will be required to complete a trial volunteer session as part of the recruitment process.

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Please return your form to: <a href="mailto:centremanager@newtonabbotcic.org.uk">centremanager@newtonabbotcic.org.uk</a>