

Volunteer application form

This form should be used by anyone wishing to volunteer at the British Red Cross and will be kept in strictest confidence

TO BE COMPLETED BY RECRUITER

Interview date _____

Volunteer status: ☐ Regular ☐ Occasional ☐ Placement

Criminal Record Check required: ☐ Yes ☐ No

Primary role code _____

Location: _____ Area: _____

Line Manager: _____

Line Manager ID no: _____

Please load onto SAVI or call SSC (Retail only) on 08450547311 to get an ID no.

Record ID number here: _____

Section A – All applicants must complete section A

About You

Title: _____ (Mr / Mrs / Ms / Dr / Other etc)

☐ Male ☐ Female

First name(s): _____

Surname: _____

Preferred name: _____

Date of birth: _____

(this will appear on your ID badge)

(if under 18 (16 in Scotland) parental consent and risk assessment will be required) We are unable to accept volunteers under 15

Home address

No. / Street _____

Town / City: _____

County: _____

Postcode: _____

Phone number: _____

Mobile number: _____

Email address:

Preferred contact type ☐ Phone ☐ Email

Have you volunteered or worked for the British Red Cross before? ☐ Yes ☐ No

If yes what is your ID number? _____

We will use your data in order to process your application and to send you information relating to your volunteering from time to time. We may also send you information relating to our products, services, events and fundraising appeals. If you would prefer we did not contact you in this way then please tick this box ☐

Would you like to receive our newsletter, Red Cross Life? ☐ Yes ☐ No

Do you have any health or additional support considerations we need to know about to support you in your volunteering?

☐ No ☐ Yes (if yes, please detail below)

What kind of roles are you interested in?

Please provide a supporting statement stating why you are interested in this position and what skills and experience you would bring to the role? (Please refer to the role description, use extra paper if required)

Why do you want to volunteer for the British Red Cross? (please tick all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> to meet new people | <input type="checkbox"/> to help others | <input type="checkbox"/> to gain new skills |
| <input type="checkbox"/> to put existing skills to use | <input type="checkbox"/> to build on my CV | <input type="checkbox"/> because I have more free time |
| <input type="checkbox"/> to do something rewarding | <input type="checkbox"/> to build confidence | <input type="checkbox"/> someone asked me if I wanted to volunteer |
| <input type="checkbox"/> other (please state) | | |

How did you hear about volunteering for us? (please tick all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> used a service | <input type="checkbox"/> word of mouth | <input type="checkbox"/> Red Cross website |
| <input type="checkbox"/> Red Cross shop | <input type="checkbox"/> first aid training | <input type="checkbox"/> volunteers bureau |
| <input type="checkbox"/> media | <input type="checkbox"/> public event | <input type="checkbox"/> social media |
| <input type="checkbox"/> do-it.org | <input type="checkbox"/> employee volunteering | <input type="checkbox"/> other (please specify below) |

Emergency contact details

Please supply details of someone who we could contact in the unlikely event of you being involved in an emergency whilst volunteering for us

Name: _____

Relationship to you: _____

Address: _____

Postcode: _____

Telephone: _____

Mobile: _____

Email: _____

Name: _____

Relationship to you: _____

Address: _____

Postcode: _____

Telephone: _____

Mobile: _____

Email: _____

Additional details

Are you applying for this role as a placement? ☐ Yes ☐ No

If yes, please tick the appropriate type of placement:

- | | |
|--|--|
| <input type="checkbox"/> Internship | <input type="checkbox"/> International |
| <input type="checkbox"/> Community payback | <input type="checkbox"/> Award scheme e.g. Duke of Edinburgh |
| <input type="checkbox"/> Via another charity | <input type="checkbox"/> Inspired Action |
| <input type="checkbox"/> School/college/university | <input type="checkbox"/> Jobcentre |

Most of the people we work with are going through various degrees of crisis.

Do you think you could support people in a crisis? ☐ Yes ☐ No

The Fundamental Principles are the foundation for our work and we require all our people to accept and demonstrate them. They are:

Humanity, Neutrality, Independence, Voluntary Service, Unity, Universality, Impartiality

Please confirm if you are able to uphold the fundamental principles ☐ Yes ☐ No

Volunteer role details

Any criminal record disclosed to us will be considered on their merits, disclosure does not necessarily prevent someone from volunteering. Internal policies and guidance exist to support the potential volunteer as well as ensuring the Red Cross makes a fair recruitment decision.

Where a volunteer will be working with vulnerable adults or with children, it is Red Cross policy to make a formal check of conviction records via the relevant authority using separate paperwork. This check will comply with the law relevant to your part of the UK and codes of practice are available on request.

Current legislation allows the British Red Cross to ask about current (unspent) convictions. Please note that some convictions are never unspent.

**I confirm that I have no unspent convictions, reprimands or warnings either in the UK or elsewhere
I have unspent convictions, reprimands or warnings, details of which are listed below**

Offence	Date of conviction	Penalty
Continue overleaf if necessary		

Please note that failure to provide full and accurate information about circumstances that may affect your suitability as a Red Cross volunteer will be viewed by the organisation as a very serious matter. Convictions sustained after completion of the Volunteer Interview Record and Confidential Declaration must be notified to the Red Cross and you could have your opportunity to volunteer withdrawn if you fail to do so.

Declaration and information governance

Please be assured that this form will be stored securely and remain confidential in accordance with internal policies and external data protection legislation.

In accordance with the Data Protection Act 1998, I consent to the British Red Cross holding and using my data in connection with volunteering. This information will be held securely and only accessed by authorised personnel.

I agree the content of this form. I have been given a copy of the volunteer mutual expectations document and I agree to uphold the expectations.

Signed: _____

Date: _____

Section B

Please complete this section if you are anticipating volunteering with us for more than a month, or on more than six occasions in the year.

Experience

Please enter if you have any experience or qualifications in the following fields

- | | |
|---|---|
| <input type="checkbox"/> Supporting those who are in financial difficulties | <input type="checkbox"/> Dementia care |
| <input type="checkbox"/> Bereavement support | <input type="checkbox"/> Food hygiene certificate |
| <input type="checkbox"/> Counselling qualifications | <input type="checkbox"/> 4 x 4 driving |

Would you be willing to use these skills in an emergency? ☐ Yes ☐ No

Languages

Language	Native Speaker	Reading Please indicate your fluency level(s) as Basic, Intermediate or Fluent	Writing Please indicate your fluency level(s) as Basic, Intermediate or Fluent	Understanding Please indicate your fluency level(s) as Basic, Intermediate or Fluent	Speaking Please indicate your fluency level(s) as Basic, Intermediate or Fluent	Trans*

*Please indicate whether you would be willing to translate for the Red Cross

References

Please provide details of 2 people who we can contact to ask about your suitability for the role. If you have ever worked in health and social care or with children or vulnerable adults, please use these employers as your references.

Reference type (e.g. employer, teacher):

Referee name:

Referee contact number (mobile if available):

Email address:

Number/Street:

Town:

Country:

Postcode :

What is the best way to contact the referee?

☐ Phone ☐ Email ☐ Address

Reference type (e.g. employer, teacher):

Referee name:

Referee contact number (mobile if available):

Email address:

Number/Street:

Town:

Country:

Postcode :

What is the best way to contact the referee?

☐ Phone ☐ Email ☐ Address

Section B continued

Driving

Please note that this section is only required when applying for driving roles.

Do you currently hold a driver's licence? ☐ Yes ☐ No

What category is your licence and is it for manual or automatic transmission?

Is your licence an international driving licence? ☐ Yes ☐ No

If non-UK which country issued your licence?

Please note any endorsements:

Section C - To be filled in by the recruiting manager

Volunteering end date (if known) _____

Parental consent form completed ☐
(if under 18)

Criminal records check applied for ☐

Photo supplied for ID card? ☐
(if regular volunteer)

Identity seen if criminal records check ☐
is not required
(please specify) _____

Driving licence seen (if role requires) ☐

Date reference requested: _____

Date minimum induction complete: _____

Date reference received: _____

Name of recruiter: _____

Date input to SAVI or SSC called: _____

Recruiter phone number: _____

British Red Cross

44 Moorfields
London
EC2Y 9AL

Tel 0844 871 1111
Fax 020 7562 2000

redcross.org.uk

Published 2012

The British Red Cross Society, incorporated by
Royal Charter 1908, is a charity registered in
England and Wales (220949) and Scotland (SC037738)



Email: production@redcross.org.uk
Tel: 020 7877 7029

Section D - To be filled in by all applicants and kept separate to application

Role applied for:

ID number:

Diversity

In line with our Fundamental Principles, we aim to be an equal and diverse organisation for our staff and volunteers. We collect this data so that we can monitor the effectiveness of this approach. This information will be kept separate from this application and will not affect the outcome.

If you do not wish to complete any question in this section, please tick the "Prefer not to say" box

Ethnicity:

- | | |
|--|--|
| <input type="checkbox"/> Arab | <input type="checkbox"/> Mixed White and Black Caribbean |
| <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> Mixed Other |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> White British |
| <input type="checkbox"/> Indian | <input type="checkbox"/> White English |
| <input type="checkbox"/> Pakistani | <input type="checkbox"/> White Scottish |
| <input type="checkbox"/> Asian other | <input type="checkbox"/> White Welsh |
| <input type="checkbox"/> Black African | <input type="checkbox"/> White Irish |
| <input type="checkbox"/> Black Caribbean | <input type="checkbox"/> White Gypsy or Irish Traveller |
| <input type="checkbox"/> Black other | <input type="checkbox"/> White Northern Irish |
| <input type="checkbox"/> Mixed- Multiple ethnic background | <input type="checkbox"/> White Other |
| <input type="checkbox"/> Mixed White and Asian | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Mixed White and Black African | |

Religion or belief:

- ☐ Agnostic
☐ Atheist
☐ Buddhist
☐ Christian (all denominations)
☐ Hindu
☐ Jewish
☐ Muslim
☐ No religion
☐ Sikh
☐ Any other religion or belief
☐ Prefer not to say

Sexual orientation:

- ☐ Bisexual
☐ Gay
☐ Heterosexual
☐ Lesbian
☐ Other
☐ Prefer not to say

(Northern Ireland applicants only) :

- ☐ I am a member of neither the Protestant nor the Roman Catholic community
☐ I am a member of the Protestant community
☐ I am a member of the Roman Catholic community

Are you disabled? ☐ No ☐ Yes (if yes, please give details) ☐ Do not wish to disclose

The Equality Act 2010 defines disability as a mental or physical impairment that has a substantial long term adverse effect on someone's ability to carry out normal daily activities.

The terms:

Physical impairment can include long term conditions such as diabetes, Asthma, cancer or progressive conditions such as motor neurone disease.

Substantial means the impairment is neither minor nor trivial.

Mental impairment can include mental health conditions such as depression, learning difficulties (dyslexia) and learning disabilities (such as Down's syndrome)

Please complete and return this along with your application form