



VOLUNTEER APPLICATION FORM

Name: _____
DOB: _____
Address: _____

Mobile: _____
Email: _____

Availability (please tick): note we are generally closed on Mondays

	Morning	Day	Evening
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

Why do you want to volunteer with us? What are you hoping to get out of it?

Do you have any prior experience volunteering in a similar environment? Please outline any relevant work-experience/employment. Also, please indicate any hospitality experience/qualifications (e.g. RSA certificate, first aid training) or attach CV.

Do you have any other commitments? E.g Study, part-time work etc

How often would you like to offer your time to us? (Please circle)

More than one day a week About once a week
About once a fortnight About once a month

Please return form to Philippa at volunteers@fortyfivedownstairs.com