Please leave blank



Location of shop:

APPLICATION FOR VOLUNTEERING

Please return to:

HR Office St Teresa's Hospice The Woodlands Woodland Road Darlington DL3 7UA

IMPORTANT: This	torm must b	e complet	ed in full.
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Title:	Forenames:
Surname:	Known as:
Address:	Telephone number:
	Mobile number:
Postcode:	
	E will add a se
	Email address:
Employed/Voluntary Work History	
Name of current/most recent employer/educational establishment:	Current job title:
establishment: Address:	Start date:
Addiess.	Reason for leaving:
	Reason for leaving.
Postcode:	
Name of manifest and leave to be seen	Lab Mala
Name of previous employer/educational establishment:	Job title:
Address:	Dates employed/attended:
	Reason for leaving:
	neason for leaving.
Postcode:	
PLEASE REQUEST ADDITIONAL WO	RK HISTORY SHEETS IF REQUIRED

EDUCATION & TRAINING: Please give brief details of education and qualifications obtained from Secondary
School, College, University etc.
Disease state the date year left full time advection.
Please state the date you left full time education:
VOLUNTARY WORK:
Please give brief details of any volunteering you are/have been involved with:
Please give details of any Clubs, Societies, or other groups you are/have been involved with:
Please explain briefly why you want to help at the hospice:
Theuse explain shelly why you want to help at the hospite.
Additional information in support of your application:
(CONTINUE ON SEPARATE SHEET IF NECESSARY)
If you require any reasonable adjustments to be made in order for you to attend an interview, please give
details here:

Rehabilitation of Offenders Act 1974

□ No

date and place of the Court hearing.

☐ Yes

The Rehabilitation of Offenders Act 1974 (as amended) helps rehabilitated ex-offenders back into work by allowing them not to declare criminal convictions after the rehabilitation period set by the Court has elapsed and the convictions become 'spent'. During the rehabilitation period, convictions are referred to as 'unspent' convictions and must be declared to employers.

The organisation aims to promote equality of opportunity and is committed to treating all applicants for positions fairly and on merit regardless of ethnicity, disability, age, gender or gender re-assignment, religion or belief, sexual orientation, pregnancy or maternity and marriage or civil partnership. The organisation undertakes not to discriminate unfairly against applicants on the basis of a criminal conviction or other information declared.

You are required to declare all current 'unspent' criminal convictions or cautions (including reprimands and final warnings). You are not required to disclose convictions or cautions which have become 'spent'.

As part of assessing your application, organisations will only take into account relevant criminal record and other information declared which is relevant to the position being applied for.

Answering 'yes' to the question below will not necessarily bar you from appointment. This will depend on the relevance of the information you provide in respect of the nature of the position for which you are applying and the particular circumstances.

*Are you currently bound over or do you have any current 'UNSPENT' convictions, cautions, reprimands or final warnings that have been

Please include details of the order binding you over and/or the nature of the offence, penalty, sentence or order of the Court, and the

You are not required to disclose information about any convictions, cautions, reprimands or final warnings which are 'SPENT' (old) under

issued by a Court or Court-Martial in the United Kingdom or in any other country?

If you have answered 'yes' above, you must answer this question:

the Rehabilitation of Offenders Act 1974.				
It is important that you understand the changes that came into effect from March 2014 under the Legal Aid, Sentencing and Punishment of Offenders Act which makes amendments to the length of time before certain sentences become spent (in England and Wales only).				
You are not required to tell us about parking offences.				
Please include any additional information or comments that you belie	eve to be relevant.			
If the position you have applied for has been identified as being an 'eligible position' under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended) and, in certain circumstances, the Police Act 1997, we may need to request a standard or enhanced disclosure through the Disclosure and Barring Service (known as a DBS check). If this is the case, you will be informed prior to the check being undertaken, and you may need to disclose further convictions, cautions, reprimands or final warnings that would <u>not be</u> protected (i.e. filtered) as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2013, on a separate form. REFERENCES:				
Please provide details of two referees who can be asked for information about you, who must not be relatives but must have				
known you for at least 3 years (e.g. previous employer or professional person).				
1 st Referee:	2 nd Referee:			
Referee type: Personal / Education / Employment	Referee type: Personal / Education / Employment			
Name:	Name:			
Address:	Address:			
Postcode:	Postcode:			
Telephone Number:	Telephone Number:			
Email Address:	Email Address:			

January 2023

These are the main volunteering roles within the hospice: please tick any which interested you. Please note,				
only some of these roles will	be availab	le at any one time, subject to numbers of vol	unteers already in role.	
Retail Assistant		Care & Support		
Volunteer Counsellor		Volunteer Host		
Ward Administrator		Kitchen Support Volunteer		
Volunteer Visitor		Complementary Therapist		
Support Volunteer		Fundraising		
Wellbeing Hub Volunteer		Gardener		
, , ,		l arrange for you to come in to discuss your in	terests, skills and	
availability to find the most s	uitable role	for you.		
CONFIDENTIALITY				
CONFIDENTIALITY:				
It is the policy of St Teresa's Hospice that all information disclosed by patients and families in our care MUST be				
1	•	S must therefore be extremely careful not to		
information about patients o	r family affa	airs which they have acquired directly or indire	ectly in the course of their	
	duties and MUST NOT, under any circumstances, discuss matters involving the state of health or welfare of			
patients.				
I have read and fully understand the above and the confidential nature of the work and will abide by this				
rule.				
Name		Signed Da	ate	
(block capitals please)				

DECLARATION: PLEASE SIGN THIS SECTION AFTER YOU HAVE COMPLETED ALL PARTS OF THIS FORM. If you are under 18 your parent or guardian will also need to sign the lower part of the declaration			
I certify to the best of my knowledge that the information given on this form is correct. I understand that deliberately giving false or incomplete information will disqualify me from volunteering.			
I understand my information will be held on a number of internal databases and will be shared appropriately.			
I consent to referees being contacted.			
I understand that St Teresa's is a hospice working with people with life limiting illness and which provides end of life care, and that volunteering in certain roles could bring me into contact with upsetting events.			
Name			
PARENT OR GUARDIAN DECLARATION FOR APPLICANTS UNDER THE AGE OF 18			
I have read the above statement, and consent to (Name) becoming a volunteer.			
Name Relationship to young person (capitals please)			
Signed Date			

For Completion by Line Manager

VOLUNTEER STARTER CHECKLIST:

Action	Done (√, N/a, or X if declined)	Initials	Date
Completed application form received			
Interview held and volunteer candidate confirmed suitable			
Notify HR immediately if volunteer is under 18 & complete risk assessment			
Basic employment and/or education history			
At least one verbal reference obtained			
Proof of right to work in the UK seen and copied:			
At least one piece of photo ID seen and copied:			
One signed copy of volunteer pledge returned			
Volunteer additional details and Health assessment form returned			
All forms passed to HR (see list of enclosures below)			

REFERENCE LOG:

Referee organisation (or name if	Type of reference	Date	Date	Date
personal)	(employment/education/personal etc.)	requested	chased	received

If the volunteer candidate is unable to provide any of the above, please liaise with HR

Please send completed file to hr ensuring the following enclosures:

- Pledge
- Additional details form
- Additional employment history forms (if applicable)
- Verbal reference form/s
- Under 18's risk assessment (if applicable)