



CommuniCare Volunteer Reception Application

Name:	
Address:	
Contact Number:	
Email Address	
Date of Birth:	

What skills and life experience do you have that might help in your voluntary work here?

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What would you like to gain from your volunteering experience?

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Are there any skills that you would like to develop during your volunteering period with us?

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The Current Volunteer Reception Shifts Available are:
(please tick any that you would be able to cover)

Day	Time	Can You Cover?

If we have no positions currently available are you happy for us to keep your details on file?

Yes / No

What day would you be able to volunteer?

Do you have any previous criminal convictions or cases pending? Yes / No

Please note that all volunteers who come into contact with clients must complete an application for DBS disclosure as you may be working with vulnerable adults.

Please indicate if you have a disability and what assistance (if any) we can provide for you.

Please give details of two referees who are not family members. Preferably one should be a Church Leader.

Name:	
Address:	
Email:	
Contact No:	
Relationship to you:	

Name:	
Address:	
Email:	
Contact No:	
Relationship to you:	

Please send the completed form to CommuniCare at
233 Kings Road, Reading, Berkshire RG1 4LS
T: 0118 926 3941 E: office@communicare.org.uk