



VOLUNTEER MENTOR APPLICATION FORM

Name: Date of Birth:

Married/Single: If married, previous name:

Address:

..... Postcode:

Home Tel No: Mobile No:.....

Email:

How long have you lived in this area? Place of Birth:.....

Number of Children: Age(s):.....

Please list your hobbies/interests:

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Are you, or have you ever been, a helper in Social Work or any other Voluntary Organisation? Please give details:

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Please give details of any training or other experience which you feel will be helpful in this work:

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What do you imagine you would be able to offer a client?

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What times would you be available for volunteer work?

Anytime: Days and time:

Do you have access to a car, which you would be prepared to use? Yes/No

Have you ever been convicted of a criminal offence? If so please give details. We are required to submit a police check with the Disclosures and Barring Service on behalf of all volunteers.

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If you have not been living at your present address for the last five years, please give details of previous addresses for the last five years, with dates. (Required for the police check).

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Any other work or personal information which you feel would be useful:

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Have you previously applied to become a Volunteer with the One to One Project?

Yes/No If yes, when was this?

Full Name and Address of two referees who we will contact to support your application.
(One **must** be from your G.P. to state that there is not a mental health/medical reason why you should not do this work. The other should be a character reference.)

G.P... .. Name

Address Address.....

.....

.....

Post Code..... **Post Code**.....

Signature: Date:

Please return completed form to:

Hannah Cooper
One To One Project
Nelson House
Bergen Way
North Lynn Industrial Estate
King's Lynn
PE30 2JG

