



## HFS Charity Shop Volunteer Application Form

Personal Details	
Name	
Date of Birth	
Address	
	Postcode:
Phone	Home:  Mobile:
Email	

### Availability

At what times are you interested in volunteering – please tick as many as you like

	Mon	Tue	Wed	Thurs	Fri	Sat	Sun
Morning							
Afternoon							

**Please tell us about any work, volunteering, personal experience or skills that you have that are relevant**

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**Do you have any particular needs that we should be aware of so as to best support your volunteering with us?**

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**Are there any particular skills that you would like to learn/develop whilst volunteering with us?**

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**References**

To complete your application, we need you to supply us with two people who know you well enough to comment on your suitability for this role. They should not be family members. If you are not sure about who to put we are happy to discuss this with you

Referee 1	
Name:	
Address:	
	Postcode:
Phone:	
Email:	
How does this person know you?	

Referee 2	
Name:	
Address:	
	Postcode:
Phone:	
Email:	
How does this person know you?	

**Under the rehabilitation of Offenders Act 1974, do you have any unspent criminal convictions?** If yes, please give details below. Having a conviction will not necessarily stop you from volunteering, but it will need to be taken into consideration when assessing your suitability.

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Signed	
Date	

**Thank you for taking the time to complete our volunteer application form.  
Please return this to us via our email [huddsferalandstrays@gmail.com](mailto:huddsferalandstrays@gmail.com)**