

Application form to become a CAB Volunteer

Please read the accompanying information before completing this form.

Please feel free to continue answers to any questions on a separate sheet if necessary.

If you find the form difficult to understand or complete, please call your local bureau.

Name: Mr/Ms/Other (please state)

Address:

Postcode:

Date of birth:

Telephone:

Email (if you have access)

Are you interested in any particular type of volunteer role(s)?

Eg adviser, administrator, social policy co-ordinator, trustee board member

Describe any skills you have that would be useful for the role you wish to do.

Some we have thought of include: dealing with people face-to-face or on the phone, speaking/writing a language other than English, sign language, filing, research, using a calculator, using a computer, helping people to learn.

Is there anything you have done over the last few years that you would like to tell us about?

Eg employment, work experience, volunteering, community activity (involvement in tenants associations, school activities, support groups, etc); caring for children, other relatives or a friend; classes, training courses.

Why do you want to volunteer for CAB?

What do you hope to get from the experience?

What do you think are some of the main problems facing your community?

It is useful to know when you will be available to volunteer.

Please indicate below the times when you are generally available:

Monday

Am

Pm

Tuesday

Am

Pm

Wednesday

Am

Pm

Thursday

Am

Pm

Friday

Am

Pm

Please indicate approximately how many hours or days per week you would like to volunteer for:

Are there any times that you are unlikely to be available, eg school holidays?

Is there anything else you would like to say about yourself?

Volunteers who wish to train as advisers only:

Have you ever committed an offence under Section 25 and 26(1) (d) or (g) of the Immigration Act 1971? (These offences concern assisting illegal entry, falsifying documentation or obstructing the authorities investigating immigration offences. If you have committed one of the offences above you may still be able to be an adviser: however, we would have to contact the Office of the Immigration Services Commissioner in order to discuss the issues)

Please tick as appropriate Yes No

References

Please give the names and addresses of two people, other than your family, who can tell us about you – for example, an employer, teacher or someone who knows you well.

Name: _____

Address: _____

Postcode: _____

Name: _____

Address: _____

Postcode: _____

Please tell us about any specific needs you would like us to take into account, either at interview or if we offer you a volunteer role:

Eg mobility, childcare responsibilities. This information will be treated as strictly confidential.

Signed _____

Date _____

Monitoring information

The CAB Service aims to provide equal opportunities and fair treatment for all people applying to be volunteers regardless of race, sex, disability, sexual identity or marital status.

As part of the policy of reaching out to excluded communities and groups, the service is committed to ensuring that bureau staff and volunteers reflect the community that they serve.

In order to achieve these aims we have a policy of monitoring the composition of bureau staff and volunteers. As part of this monitoring process we ask for your co-operation in completing the questions in this section. We wish to give you the following assurances:

- The information provided will not form the basis of any part of selection.
- All information from the application form will be regarded as confidential.
- This monitoring information will only be used for statistics.
- If you choose not to complete this section, this will not affect your application.

Please tick as appropriate

Age <25 25-34 35-44 45-54 55-64 65+

Gender Female Male

Would you describe yourself as disabled? Yes No

Please indicate your ethnic group by ticking one box

White

- British
- Irish
- Other White

Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Other Mixed

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Other Asian

Black or Black British

- Black Caribbean
- Black African
- Other Black

Chinese or other Ethnic Group

- Chinese
- Other Ethnic Group

What prompted you to apply to be a CAB volunteer?

Eg newspaper article or advert, poster, through a friend or relative, using a CAB yourself

Please return this application form to:

North East Derbyshire Citizens Advice Bureau
126 High Street
Clay Cross
Derbyshire
S45 9EE