



# FiSH Volunteer Application Form - 2018

<b>Title:</b>
<b>Firstname:</b>
<b>Surname:</b>
<b>Address:</b>
<b>Postcode:</b>
<b>Home phone:</b>
<b>Mobile:</b>
<b>Email:</b>
<b>Date of birth:</b>

Do you have any special skills or knowledge to offer (e.g. language, nursing, electrical, financial, music etc.) *(please type/write in box below)*

Roughly how much time do you feel you can reasonably offer to FiSH?

- Occasionally
- Approximately 1 hour a week
- More than 1 hour a week
- As often as reasonably required
- Other

When might you be available?

- Monday  Tuesday
- Wednesday  Thursday
- Friday  Saturday
- Sunday
- Mornings  Afternoons  Evenings

Are there any days/times when you would not normally be available to help FiSH?

To comply with current legislation FiSH will require a DBS (Disclosure Barring Service) check to be carried out on your details. Would you be willing for such a check to be undertaken if necessary?

- Yes  No

For car drivers, do you have motor insurance:

- Yes  No
- Fully Comprehensive  Third Party
- Two car doors  Four car doors

Which of the following activities might you be willing to offer to FiSH? *(please tick)*

- Befriending (companionship)
- Escort for bus
- FiSH Coffee Corner (listening)
- Retro Café (for those with memory loss)
- Bridge
- Choir
- Gardening
- Handyperson
- Home Organisation/Decluttering
- Minibus driving
- Shopping
- Car Driving (local trips)
- Car Driving (central London)
- Baking / catering
- Lunchtime Concerts
- Special Events (concerts / Barnes Fair etc.)
- Clerical skills
- IT Skills
- PR/Marketing
- Fundraising
- Bookkeeping

Do you have experience of: *(please tick)*

- Dementia
- Using wheelchairs

Continued...

Please give the names and contact details of two referees who have known you for at least two years. Referees should NOT be family members.

**Referee 1**

<b>Name:</b>
<b>Address:</b>
<b>Phone:</b>
<b>Email:</b>
<b>How do they know you?</b>

**Referee 2**

<b>Name:</b>
<b>Address:</b>
<b>Phone:</b>
<b>Email:</b>
<b>How do they know you?</b>

**Please indicate your ethnic background**

*(We are obliged by law to ask for this information.)*

- White British
- Other *(please give details in box below)*
- Prefer not to say

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**Next of Kin** *(will only to be used in emergency)*

<b>Name:</b>
<b>Relationship:</b>
<b>Phone:</b>

**Data Protection**

*I give permission to FiSH to keep this information on a confidential database and to be used only for appropriate purposes in connection with the work of FiSH.*

Signed:
Date:

**NB.** *If submitting this form by email you will required to sign the form when attending the office for interview/DBS clearance.*

*For office use only:*

<i>Interview Date:</i>	
<i>DBS Applied for:</i>	<i>DBS received:</i>
<i>Ref 1 requested</i>	<i>Ref 1 received:</i>
<i>Ref 2 requested</i>	<i>Ref 2 received:</i>

**Please return this form either by email [info@fishhelp.org.uk](mailto:info@fishhelp.org.uk) or by post to:**

**FiSH Neighbourhood Care, Barnes Green Centre, Church Road, Barnes, London SW13 9HE**

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