

Shop Volunteer Application Form

Thank you very much for your interest in volunteering for Leeds Women’s Aid at our charity shop. If you need assistance with completing this form, please email us at LWACharityShop@leedswomensaid.org.uk.

All the information you provide on this form is confidential and will not be passed on to a third party. For more information on our privacy policy please visit <https://leedswomensaid.co.uk/privacy-policy/>

|  |  |
| --- | --- |
| **Where did you learn about this opportunity?** |  |

**Please tell us about yourself**

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** |  | **Forename(s)** |  |
| **Surname** |  | | |
| **Address** |  | | |
| **Post code** |  | | |
| **Telephone** |  | | |
| **Email** |  | | |
| **Emergency contact:**  (Name, relationship to you & contact number) |  | | |
| **Please select which method(s) you would prefer for contacting you about your volunteer application** | Phone    Email Letter | | |

**Please tell us why you would like to volunteer for Leeds Women’s Aid (you can tick more than one box)**

|  |  |  |  |
| --- | --- | --- | --- |
| I want to help women and children effected by domestic violence |  | I’m interested in meeting new people |  |
| To make myself more employable |  | Sharing my skills and experience to help others |  |
| Give something back in my community |  | I want to develop new skills |  |
| To keep myself busy |  | Something enjoyable to do with my time |  |
| I was asked by a friend |  | I want to make a difference |  |
| To help me in my journey |  | I believe in this cause |  |
| I have accessed LWA support services and want to give back |  | I’d rather volunteer than give money |  |

**Please tell us a little more about you and what skills and qualities you feel make you suitable for this volunteer role**

**Your availability to volunteer**

## Which days/ times are you available to volunteer? (Please note; we will aim to work around your availability but if a particular shift is over subscribed we may not be able to accommodate you- please tick to indicate you are happy for us to keep your details on file so we can contact you if your desired shift becomes available [ ] )

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Sat** | **Sun** |
| **Morning** |  |  |  |  |  |  |  |
| **Afternoon** |  |  |  |  |  |  |  |
| **Evening** |  |  |  |  |  |  |  |

**Volunteering status**

The right to volunteer in the UK can be dependent on your citizenship and UK immigration status so please make sure that you are allowed to volunteer on your visa.

Are you legally entitled to stay in the UK? Y/N

**References**

Please provide us with the details of up to two people whom we may contact as referees, to comment on your suitability for volunteering. These can be friends or colleagues but not family members, and must have known you for six months or more;

|  |  |  |
| --- | --- | --- |
|  | Referee 1 | Referee 2 |
| Name |  |  |
| Email |  |  |
| Telephone |  |  |
| What is your relationship to this person? |  |  |

**Keeping you informed about Leeds Women’s Aid**

Your support means a lot to Leeds Women’s Aid. We want you to see the difference your support makes, and we’d love to stay in contact by e-mail, phone and post to let you know about the work of Leeds Women’s Aid and how you can help protect women and children from domestic violence through fundraising, campaigning and volunteering.

Please tick the boxes below to let us know you are happy to hear from us in this way:

[    ] Yes, please keep me updated by e-mail

[    ] Yes, please keep me updated by post

[    ] Yes, please keep me updated by phone

Declaration

I declare that the information given in this application is a true and complete statement. I understand that any offer of appointment and subsequent volunteering is subject to satisfactory references and satisfactory disclosure from the Disclosure and Barring Service or Disclosure Scotland at the appropriate level, where this is a requirement of the role (if stated in the volunteer role description).

Signature: Date: