**PLEASE COMPLETE THIS PAGE, THEN READ, SIGN & DATE THE DECLARATION OVERLEAF.**

**Your Details – please enter your details in the box below.**

|  |  |
| --- | --- |
| **Name:** | **Date of Birth:** |
| **Address:****Postcode:** | **Tel:** |
| **Tel:** |
| **Email:** |
| **Sex: Male** [ ]  **Female** [ ]  | **Gender:** |
| **Emergency Contact Details – please enter the details of your emergency contact in the box below.** |
| **Name:** | **Relationship:** |
| **Tel:** | **Tel:** |
| **REFERENCES - Could you please provide names of two referees who would be willing to provide a character reference for you to support your application for volunteering. This should not be someone you live with, a family member or someone who is a close personal friend. Thank you.** |
| **Name:** | **Relationship:** |
| **Address:****Postcode:** | **Tel:** |
| **Tel:** |
| **Email:** |
| **Name:** | **Relationship:** |
| **Address:****Postcode:** | **Tel:** |
| **Tel:** |
| **Email:** |

**Which type of Volunteering interests you? Please ‘X’ your Volunteering Interests.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Befriending - Mental Health Service**  |  [ ]  |  **Befriending - Memory Loss & Carers Service** |  [ ]  |
| **Befriending - Face to Face** (Inverness, Nairn, Caithness, Skye/Lochalsh, Alness/Invergordon, Dingwall, Drumnadrochit) |[ ]
| **Befriending - Distance** (Telephone, Letter, Email, Video Call, Gaming) |[ ]
| **Befriending - Group** (To lead or assist at our groups - cinema, writing, walking, recovery, art & crafts) |[ ]
| **Fundraising Volunteer** (ongoing or one-off events - raising funds, promotion, helping with fundraising applications) |[ ]
| **Charity Ambassador** (ongoing - raising awareness, promotion, attending events) |[ ]
| **Administration Volunteer** (data entry, research, mailouts, helping to write newsletters, designing new posters etc) |[ ]
| **Social Media Volunteer** (updating social media accounts, sharing relative posts) |[ ]
| **Training Volunteer** (helping to develop skills for staff, volunteers, and friends) |[ ]
| **Join the Board of Directors** |[ ]
| **Other (please give details of how you could help out)** |[ ]

**What you need to become a Volunteer with Befrienders Highland**

* **You must be aged 18 or over.**
* **You must be reliable.**
* **You must have a warm and positive manner.**
* **You agree to provide 2 references (one who has known you in a professional/voluntary capacity, neither should be a family member/related to you).**
* **You agree to participating in a volunteer discussion so we can find out about you, your interests, hobbies, work, family, and any experience you have of mental ill health/memory loss, which may be of benefit in your volunteering role with Befrienders Highland. This discussion can be done in person, by video call or phone.**
* **You agree to disclose anything about your past or present life that could be sensitive when volunteering for a charitable organisation. This will be discussed confidentially with your coordinator.**
* **You understand the purpose of, and agree to, a general internet search.**

**If you wish to become a Volunteer Befriender with Befrienders Highland – Application Agreement**

* **You understand the purpose of, and agree to, completing a Protection of Vulnerable Groups (PVG) application form to become part of the PVG membership scheme (Police check).**
* **You agree to complete the Befrienders Highland volunteer training programme involving a series of workbooks completed at home with a tutorial with your coordinator on completion of each one.**
* **Once trained, you agree to sign a Volunteer Agreement and Confidentiality Statement.**
* **You agree to regular contact with your coordinator for support and supervision.**
* **You agree, once matched, to regular reviews of your friendship with a coordinator.**
* **You agree to contact the coordinator at any time should you ever have any concerns or are no longer able to meet your agreed commitment to Befrienders Highland or your friendship.**
* **You agree to continued volunteer training and development.**

**I have read, understood, and agree to, the statements above and would like to proceed with my application to become a Volunteer with Befrienders Highland.**

**Signature Date**

**Please return this fully completed, signed, and dated volunteer application form to:**

**Befrienders Highland, 1st Floor, Academy House, 42 Academy Street, INVERNESS, IV1 1JT,**

**or email it to** **info@befriendershighland.org.uk**

**Please note if a volunteer no longer wishes to volunteer with Befrienders Highland any data held regarding the volunteer will be destroyed, at point of leaving. Should you return to the service in the future, the necessary information will need to be gathered again. For further information regarding this please view our Privacy Policy or contact: admin@befriendershighland.org.uk**

**Abbreviated Privacy Policy**

Full statement available from our website or by contacting Befrienders Highland Limited (BHL).

BH have a legal duty under the Data Protection Act to prevent your information falling into the wrong hands. BH must also ensure that the data BH hold is accurate, adequate, relevant, and not excessive.

BH will make it clear which information is required in order to provide you with the information or service you need from us. You do not have to provide us with any additional information unless you choose to. BH stores your information securely on our computer system.

BH would also like to contact you in future to tell you about other areas of our service. You can also contact us directly at any time to tell us not to send you any future information outside of information necessary for us to work effectively with you. You have the right to a copy of all the information BH hold about you (apart from a very few things which BH may be obliged to withhold because they concern other people as well as you).