

# VOLUNTEER APPLICATION FORM



*This information is covered by the Data Protection Act 1998*

It is important that the Cardigan Bay Marine Wildlife Group is aware of information relevant to your volunteering activities with us at the Cardigan Bay Marine Wildlife Centre.

*Please print information in capitals or circle/delete where appropriate.*

*You may use bullet points where appropriate & box sizes can be used as a rough indication of the amount of information required.*

## Section A – Personal Details

Name (First name & Surname):		
Full postal address (including postcode)		
Date of birth:	Welsh speaker? Y / N	Male / Female (delete as appropriate)
Telephone (including STD codes):	Mobile Phone number:	Email address:

Emergency Contact Name:	Relationship to you:	Mobile phone number:
Contact telephone number:	Contact address:	
Additional emergency contact information:		

Have you had an up to date Tetanus Injection within the last ten years?	Yes / No
Do you have any physical or medical conditions, or any medication that we <u>may need</u> to be aware of (e.g. asthma, allergies, etc.)?	
Have you any <u>relevant qualifications</u> that may be beneficial for your volunteer role (e.g. up to date First Aid certificate)?	
If English is not your native language, how well do you speak & write it?	
Fluent	Competent
	Basic
Please note you will be dealing with members of the public on a daily basis and will be asked to answer telephone calls and queries.	

Do you own a car?	Yes / No
Do you hold a valid full driving licence?	Yes / No
Can you swim 50 metres?	Yes / No
Do you have experience working on boats?	Yes / No
Do you have experience dealing with the public?	Yes / No

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## Section B - Availability

Please note that our visitor centre is open & boat surveys run seven days a week during the busy summer period. Volunteers may be asked to be available 6 days a week during busy periods.

Please write down your period/s of availability:

From ..... To .....

Length of commitment period (no. of weeks within that period) .....

Please note we will organise your days off upon your arrival.

If there is more than one period that you are available then please indicate this.

E.G. From 5<sup>th</sup> April 2009 To September 21<sup>st</sup> 2009

Length of commitment period (no. of weeks within that period) 16 weeks

### **Local volunteers:**

If you live locally please indicate which days of the week you are available (am or pm or both)

Monday (am/pm), Tuesday (am/pm), Wednesday (am/pm), Thursday (am/pm), Friday (am/pm), Saturday (am/pm), Sunday (am/pm)

Length of commitment period (days/week).....

## Section C – Skills & Interests

Educational qualifications (Please list):

Current Employment status (e.g. Employed or student – please give details):

Why are you interested in volunteering at the CBMWC?

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Please tell us about your skills (for example experience working in a visitor centre, shop, fundraising, working with volunteers, educational work, marine mammal survey work etc...) & any relevant experience you may have that relates to the work of the CBMWC & volunteers roles.

Do you have experience handling money? If yes in what capacity?

Have you applied or taken part in this or similar voluntary schemes before? If yes please give details.

Do you have previous experience of any of the following?

Research/Surveying, Dealing with the general public, Working with volunteers, Working for small organisations

Please give details and experience:

Do you wish to pursue a career in marine biology, conservation, the environment, education or any other related fields?

How/where did you find out about volunteering at the CBMWC?

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## Section D – Declaration

**Declaration:** I understand work will be allocated to me by staff at the CBMWC according to my abilities. I am responsible for my own accommodation, travel expenses, any other expenses incurred during my volunteering period and for providing and cooking my own food during my stay. Any observations made during my visit may only be used or published with prior permission from the CBMWC. Insurance for travel, medical treatment and personal affects is my responsibility.

Signed: ..... Date: .....

If sending electronically you will be asked to sign this upon arrival.

If under 18 when volunteering starts approval of a parent or legal guardian is needed for your participation in all aspects of the scheme.

Signed: ..... Date: .....

If sending electronically please also send a letter of approval from your parent/guardian.

**\* PLEASE NOTE A CRIMINAL RECORD BUREAU CHECK WILL BE REQUIRED WHEREVER WORK WITH CHILDREN IS INVOLVED**

### For office use only:

Date received: \_\_\_\_\_ Induction Date \_\_\_\_\_ Finish Date \_\_\_\_\_