

RSPCA Hull & East Riding Branch
Clough Road, Hull. HU6 7PE
Reg. Charity No. 232225
Volunteer Application Form

Personal Details

Name.....
Address.....
.....Postcode.....
Tel no. (day).....Tel No. (Evening).....
Mobile No.....

The minimum age for any voluntary role is 16.

Age (if over 75 for Insurance purposes).....

Volunteer interest – please tick those areas of volunteering you are interested in

Animal Care []

Please note we very rarely have availability for a volunteering role during the weekends

Meeter & Greeter on reception []

Must be available 11 – 4pm weekdays & 11 – 3.30pm Saturdays & Sundays (please indicate at the bottom of the page which day/s only & not the time)

Fundraising

Supermarket Collections []

Events at the Animal Home []

Flag day collection []

Hull fair collection []

Committee work []

When are you available for volunteering?

Which Day/s?..... from.....

Time: Flexible [] Mornings [] Afternoons []
8.30-12.30 1.30-5.30

Current employment.....

Are you a volunteer at present & if so where?.....

Previous employment/volunteering experience.....

Details of other skills or interests.....

Are you aware of any medical condition(s) that may affect your ability to undertake the volunteering activities you have indicated on the form?.....

Referees (please provide details of two people, **one being your employer if applicable** plus one other person **not related to you**, who we may ask for a reference)

Name.....Name.....

Address.....Address.....

Postcode.....Postcode.....

Telephone no.....Telephone no.....

Relationship of referee to you.....Relationship of referee to you.....

We look forward to receiving your application and will ensure that any information you have provided about yourself will be treated as confidential. Your details may be kept on a volunteer database and we may use the data to keep you up to date with other volunteer opportunities and RSPCA news. The RSPCA may also use your name in future to advise you of other interests which could be of benefit to animal welfare. Should you prefer not to receive this information please tick this box []

Signature.....Date.....

When completed please return this form to RSPCA use only	
Sarah Clarkin	Date of interview.....
RSPCA	Name of interviewer.....
Clough Road	Will volunteer undertake a volunteering role Y/N
Hull	If yes, what will they do.....
HU6 7PE	If no, reason why.....
	Date of induction.....