



THE PHOENIX  
PROJECT IOW

# Volunteer Application Form

Please tell us how you heard about this vacancy:

## 1. Personal details

Last Name:

First Name:

Address:

  

Postcode:

Home Telephone No.

Daytime Contact  
No.

E-mail address:

## 2. Volunteer Interests

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

Arts and Crafts	<input type="checkbox"/>	Music	<input type="checkbox"/>
Computer Skills	<input type="checkbox"/>	Photography	<input type="checkbox"/>
Cleaning	<input type="checkbox"/>	Sport	<input type="checkbox"/>
Cooking	<input type="checkbox"/>	Swimming	<input type="checkbox"/>
Driving	<input type="checkbox"/>	Tea Making	<input type="checkbox"/>
Fundraising	<input type="checkbox"/>	Woodwork	<input type="checkbox"/>
Gardening	<input type="checkbox"/>	Other – Please Specify	<input type="checkbox"/>
Listening /Befriending	<input type="checkbox"/>		
Maintenance/DIY	<input type="checkbox"/>		

### 3. Information in support of your application

Experience as a Volunteer

Relevant Work Experience

Hobbies and Interests

Why would you like to be a volunteer with Phoenix Project

Do you have any Criminal Convictions (other than minor driving offences)? Yes / No  
If yes, please state date and nature of conviction

Approximately how much time would you like to give each week? Please indicate particular days or times.

### 4. Convictions/ Disqualifications

Volunteering is dependent on a Disclosure and Barring service check at Enhanced level and this disclosure will include details of cautions, reprimands or final warnings as well as convictions.

**Please provide details below of any convictions which are not spent under the terms of the Rehabilitation of Offenders Act 1974:**

## 5. References

Please give two **independent** referees who would be willing to supply a character reference (these must not be family members)

Reference 1	Reference 2
Name: Address:  Contact No: Email:  How is this person known to you:	Name: Address:  Contact No: Email:  How is this person known to you:

## 6. Declaration

### Statement to be Signed by the Applicant

The information in this section is true and complete. I agree that any deliberate omissions, falsifications or misrepresentations in the application form will be grounds for rejecting this application or subsequent dismissal if employed by the organisation.

Signed:

Date:

## 7. Submitting your application

### By Hand or Post:

The Phoenix Project IOW  
36 Salters Road  
Haylands  
Ryde  
Isle of Wight  
PO30 3EP

### By E-Mail:

[enquiries@phoenixprojectiow.org](mailto:enquiries@phoenixprojectiow.org)

### Enquiries:

Telephone: 01983 810172