



# Belfast Central Mission – Volunteer Application Form

Which volunteer role(s) are you applying for?

Lunch Club Helper (*Wednesdays*)
  Befriender
  Other

Do you hold a full UK Driving Licence?

Yes  No

Do you have access to a car?

Yes  No



## Section 1: Personal Details

Title		Forename Name(s)	
Last Name			
Address			
Postcode		Mobile No:	
Email:		Nat insurance no:	



## Section 2: How did you hear about volunteering with BCM?

Tick all that apply below

Social media		Referred by an agency		Online Search	
Referred by a friend		Referred by a BCM service user		Other	
Referred by a volunteer		Advertisement Be Collective		If other please state here	
Referred by a BCM staff member		Advertisement Community NI			



### Section 3: About You

<b>1. Please state below if you already have an involvement with BCM and in which capacity?</b>
<b>2. If you are currently employed please state your current occupation below and give the name of your current employer.</b>
<b>3. If you are currently a student please tell us about your course(s), where you are studying and how you feel this would equip you for volunteering with us.</b>
<b>4. Have you volunteered before? Tells us about that and what you learned from it.</b>
<b>5. Please tell us why you would like to volunteer with Belfast Central Mission.</b>



**6. Do you have any skills / interests that you would like us to know about that you feel would be helpful in the role you are interested in?**

**7. Tell us about your availability and preferred days/hours for volunteering?**

**8. Are there any further circumstances that you would like us to be aware of or any medical conditions that we need to consider that would be relevant to you volunteering with BCM?**

*See page 4 for Criminal Record Disclosure and Declaration*



## Criminal Record Disclosure

<p><b>Have you been involved or are you currently involved in any disciplinary action or legal proceedings which may undermine your standing ability to carry out the volunteering role?</b></p>	<p>Yes</p> <input type="checkbox"/>	<p>No</p> <input type="checkbox"/>
<p><i>Defined as 'Excepted' by The Rehabilitation of Offenders (Exceptions) Order (NI) 1979 (amended 1987, 2001, 2003, 2009) or as a 'Regulated Activity' (as defined by The Safeguarding Vulnerable Groups (NI) Order 2007, you must declare ALL convictions, cautions, reprimands or final warnings on your criminal record both 'spent' and 'unspent.'</i></p> <p><b>Have you ever been convicted of a criminal offence or cautioned, reprimanded or given a final warning by the police? ('Spent' &amp; 'Unspent')</b></p>	<p>Yes</p> <input type="checkbox"/>	<p>No</p> <input type="checkbox"/>
<p><b>Barred Lists</b></p>		
<p><i>A barred list is a list currently held by the Independent Safeguarding Authority (ISA) that provides details of individuals barred from working with vulnerable groups. <b>Have you been referred for inclusion on the Children's Barred List or the Adults Barred List, which would prevent you from working with these groups?</b></i></p> <p><i>Note: It is against the law for BCM to employ someone for this kind of work if they know they are on one of the barred lists.</i></p>	<p>Yes</p> <input type="checkbox"/>	<p>No</p> <input type="checkbox"/>

### Declaration:

1. I confirm that the information contained in my application for a volunteering role with Belfast Central Mission is true and complete to the best of my knowledge and belief.
2. I understand and agree that should I be successful in this volunteering application I or BCM will if required, apply to Access Northern Ireland for an Enhanced Disclosure Certificate or criminal records including 'spent' and 'unspent' convictions.
3. I agree that BCM may take up references.
4. I understand that should the Disclosure Certificate or references not be to the satisfaction of BCM, any offer of voluntary work may be withdrawn or my voluntary role terminated.
5. I understand that knowingly giving false information or suppressing any material fact will lead to termination of the volunteering role.

<p><b>Applicant's Signature</b> <i>Type full name if using PDF fillable version.</i></p>	
<p><b>Date</b></p>	

Please return to **Alison Irvine, Volunteer Coordinator**, email: [airvine@belfastcentralmission.org](mailto:airvine@belfastcentralmission.org)

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