



Sutton Bonington
Primary School



Volunteer Application Form

Thank you for your interest in volunteering at our school. Please complete this application form, and we will contact you regarding the next steps.

SECTION 1 PERSONAL INFORMATION	
Full Name	
Date of Birth	
Address including post code	
E mail address	
Contact number	
Emergency contact (name, relationship and contact number)	
SECTION 2 VOLUNTEERING ROLE AND AVAILABILITY	
Which role(s) are you interested in volunteering for?	
Why do you want to volunteer in our school?	

What experience do you have of working or volunteering with children?	
Please indicate your availability giving specific days and times.	
SECTION 3 SKILLS , KNOWLEDGE AND EXPERIENCE	
What skills, knowledge or experience can you bring to our school?	
SECTION 4 SAFEGUARDING AND CHILD PROTECTION	
As part of our commitment to safeguarding and keeping children safe we are required to carry out a series of checks on all volunteers.	
<p>Disclosure and Barring Service (DBS) check:</p> <p>All volunteers are required to undergo an enhanced DBS check which may include barred list depending on the volunteering role. Are you willing to undertake this process?</p> <p>YES <input type="checkbox"/></p> <p>NO <input type="checkbox"/></p>	
<p>Have you ever been convicted of a criminal offence or received a caution, warning or reprimand?</p> <p>If yes, please provide details below. Spent convictions under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 must also be declared.</p> <p>YES <input type="checkbox"/></p> <p>NO <input type="checkbox"/></p> <p>If yes please provide details in a separate envelope marked confidential and for the attention of the Head Teacher</p>	

Have you ever been subject to any safeguarding concerns in any employment or volunteering roles?

YES

NO

If yes, please provide details in a separate envelope marked confidential and for the attention of the Head Teacher.

SECTION 5 HEALTH AND WELLBEING

Do you have any medical conditions or disabilities that we should be aware of in order to support you in your volunteering role?

YES

NO

If yes, please provide details. If you wish to provide details separately and marked confidential for the attention of the Head Teacher please do so.

SECTION 6 REFERENCES

Please provide the names and contact details of two referees who can comment on your suitability to work with children. One referee should, ideally, be from your most recent employer or volunteer position.

Reference 1	Reference 2
Name:	Name:
Relationship to you:	Relationship to you:
Organisation:	Organisation:
E mail address:	E mail address:
Contact number:	Contact number:

SECTION 7 DECLARATION

I declare that the information I have provided is true and accurate to the best of my knowledge. I understand that providing false information may result in my application being rejected or my volunteering position being terminated.

I agree to comply with the school's safeguarding policies and procedures and understand that all volunteers are required to uphold the school's commitment to the safety and wellbeing of children.

Signature	
Date	

Office Use Only

Application Received on:

DBS Check Completed:

References Checked:

Interview Conducted by:

Start Date: