

HOME-START PORTSMOUTH

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VOLUNTEER APPLICATION FORM

If you have difficulty in completing this form, please ask the Home-Start co-ordinator for assistance.

Name		Title	
Address			
Post Code			
Home Telephone		Work Telephone	
Date of Birth		Place of Birth	
Nationality		Ethnic Origin	
Religion			
Names of Children:	Age:	Please give information about your parenting experience:	
REFERENCES: Please give the name and address of two referees (not a relative) who may be contacted by Home-Start.			
Referee 1		Referee 2	
Name:		Name:	
Address:		Address:	
Post Code:		Post Code:	

Languages spoken			
The minimum commitment to Home-Start must be 2/3 hours per week. What is the maximum time you could offer on a regular basis?			
What type of transport would you use?		If car-do you have a current clean driving licence?	
Please give details of any voluntary/paid work you have done, particularly with children and families:			
Have you any commitments, which could affect your work with Home-Start e.g. part-time work?			
What are your hobbies and leisure interests?			

Have you any skills or personal experience, which may be relevant to your work as volunteer for Home-Start?

How did you hear of Home-Start?

Why would you like to become a Home-Start volunteer?

Are there any situations in which you would find it difficult to work with families? (This can be added to at the end of training).

As volunteers are in a privileged position visiting families in their own homes and have contact with young children, Home-Start has a responsibility to ensure that no one becomes a volunteer who would misuse this trust. Therefore, it is essential that you complete and sign this form.

Name:	
Have you had any personal contact with Social Services/ Social Work Department or NSPCC/Children 1 st in connection with children in your care?	YES / NO
Do you have any medical condition (physical or mental) that could affect your work as a volunteer?	YES / NO
Have you ever been dismissed from any paid or voluntary work?	YES / NO
Have you ever been convicted of any criminal offence?	YES / NO
Are there any matters outstanding that may lead to a criminal prosecution?	YES / NO
If you answer yes to any question please give details:	

I give permission for the organiser of Home Start Portsmouth to carry out a police check for criminal convictions, or any other checks with the Department of Health, Social Services or Department for Education. I understand that my National Insurance number may be required.

I know of no reason why I would be unsuitable to be a Home-Start volunteer.

Signed: _____

Date: _____