

Community Volunteer application form

Confidential

Date of application Surname			Mr. / Mrs / Miss / Ms (circle as appropriate)					
First name/	S							
Address								
Postcode								
Telephone.	Telephone.				Mobile telephone			
Email								
Do you have use of a car for your voluntary work? Yes / no							no	
Do you hold a clean driving licence?				Yes / no				
Please tick	availabilit	y below ((if not avai	lable for the w	hole sess	ion add actu	al times)	
	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
Morning 1000-1300								
Afternoon 1400-1700								
Evenings (If								
discussed)								
			ently wo	rking please	e give us	some det	ails of your	
previous en	ipioymem	.)						

Do you have any current or past voluntary experience?
If so please give details:

Do you have any qualifications or special skills that might be useful at the Nurseries? If so please give details.

Do you have any special hobbies or interests that might be useful at the Nurseries? If so please give details.

Type of volunteer work preferred:

How did you hear about us?

References – please provide the names and addresses of 2 referees (not family members). If possible, one of these from your present or previous employer.

Referee 1	Referee 2	
Relationship	Relationship	
Address	Address	
	Tel	

Please return this form to the Volunteer Coordinator, Braywick Heath Nurseries Ltd., 41 Braywick Road, Maidenhead, Berks SL6 1DX.

Braywick Heath Nurseries office use only Ref requested:	
Refs received:	
Applicant interviewed:	
CRB requested:	
CRB received:	
Induction attended	
Exit interview	