

Working Towards 100 Flourishing Communities

For office use only Ref no: _____/_____

If you require advice or assistance in completing your application form, please contact Human Resources, telephone: 01529 308211.

Type of Volunteering you are interested in:

Title:	Surname:	First Name:
Address:		
Postcode:		
Home Telephone:		Mobile:
		Email:

Disability

Do you consider yourself to have a disability?*2? Yes* No

Do you have a relationship with any Councillor or employee of North Kesteven District Council?

Yes* No

*If yes, please give details

Have you ever been convicted of a criminal offence?*

Yes* No

*If yes, please give details unless exempted under the Rehabilitation of Offenders Act (1974)

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References

Reference 1

Title:

Surname:

First Name:

Position:

Address:

Postcode:

Email:

Telephone Number:

Reference 2

Title:

Surname:

First Name:

Position:

Address:

Postcode:

Email:

Telephone Number:

Current Employment/ Volunteering Circumstances

Name:

Address:

Postcode:

Job Title:

Salary(if applicable):

Period of time in role:

Notice period (if applicable):

Main duties of role:

Description:

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Qualifications

(Please list all qualifications relevant to this post, including professional qualifications)

Examinations taken	Result	Examinations taken	Result

Are you a member of a professional body? Yes No

Name of Body, Level and Membership Number:

If the volunteering information indicates that the use of a vehicle is required do you have:

A current full car driving licence? Yes No HGV licence? Yes No

A current full motorcycle licence? Yes No A car available for work? Yes No

Any endorsements? Yes* No *If yes, please provide details:

Personal statement (please state why you have applied for volunteering with NKDC and why you feel you would be good at this role):

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Data Protection

All information provided on this form will be handled in accordance with the Data Protection Act 1998. The information will be used for volunteer recruitment and personnel functions by North Kesteven District Council and will not be disclosed except in accordance with the law.

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

PSS6434RT

I declare that the details are true, complete and correct. I understand that any false statement or omission will normally lead to my volunteer work ceasing.

I understand that I will be privy to confidential information whilst I am working for North Kesteven District Council and that I will treat such information with discretion.

Signature of applicant: _____ Date _____

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