

Let Us Shine Volunteer Application Form

Please complete this form in type or black ink and return by e-mail to volunteer@letusshine.org

or to Let Us Shine, 4 Inglewood Crescent, East Kilbride, G75 8QD, UK

Personal Details

Title	Surname	Forenames in full	
Correspondence address: Postcode:		Contact number:	E-mail:
Date of Birth	Nationality	Languages spoken	Passport number

Medical

The Disability Discrimination Act 1996 defines disability as a 'physical or mental impairment which has a substantial and long term adverse effect on the ability to carry out normal day-to-day activities'.

Based on this definition, do you consider yourself to have a disability? Yes No

If you answered yes, please state the nature of your disability and indicate whether you would need any particular arrangements to be made, or support provided, if you were invited to interview/offered the post.

Do you have any relevant medical conditions we should know about in taking you to a rural location?

If you answered yes, please disclose what medication (if any) you are required to take:

Do you have any specific dietary requirements/allergies?

Next of Kin

Please give below the names and contact details of two people who may be contacted in case of an emergency.

Name	Address
Relationship to you:	Telephone E-mail
Name	Address
Relationship to you:	Telephone E-mail

Referees

Please give below the names and contact details of two people from whom references may be sought.
Referees should be able to provide a reference by email or post

Name:	Address:
Organisation/Relationship:	Telephone: E-mail:
Name:	Address:
Organisation/Relationship:	Telephone: E-mail:

You do not need previous experience to volunteer as enthusiasm is worth so much to us, however it helps us to know about your skills, experience and knowledge. Please use the space below to tell us more about what you think you would bring to your work as a Let Us Shine volunteer and why you are interested?

How did you hear about Let Us Shine?

Why have you chosen to pursue a volunteer programme with Let Us Shine?

What skills or experience do you have that could benefit the charity?

Have you worked with children before, and if so in what capacity?

Volunteer Placement

What would you hope to be involved in during your volunteer placement in Ghana?

What dates and duration are you considering for your volunteer placement in Ghana?

Criminal Convictions (CONFIDENTIAL)

We ask everyone who wants to volunteer for our charity to disclose all convictions, including spent ones, at this stage. The information you give us will be held in strict confidence.

Do you have any criminal convictions/cautions?

If 'YES' please give details in a separate letter and send this with your application form in an envelope marked 'Confidential'.

Any other relevant information

If there is any other information that you feel is relevant to your application please give details below.

Declaration and Data Protection Act

In accordance with the Data Protection Act 1998, the information provided on this form will be used in the selection process for the Let Us Shine Volunteer programme and may be disclosed to all those who need to see it. It will also form the basis of the confidential personnel record if successful. In the case of unsuccessful applicants the information will be destroyed after 6 months.

I agree that Let Us Shine has the right to validate any of the information provided.

I certify that to the best of my knowledge, the information given on this form is correct.

Signature:

Date: