

Please complete all sections and return to the Volunteer Administrator at the above address

VOLUNTEER INFORMATION FORM

Dr/Mr/Mrs/Miss/Ms/Rev Surname: _____ Forename(s): _____ Address: _____ _____ _____ _____ Email: _____	Date of Birth: _____ Your telephone numbers: Home: _____ Work: _____ Mobile: _____
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CAPACITY IN WHICH YOU WISH TO VOLUNTEER

How did you hear of volunteering at Harris HospisCare with St Christopher's (if advertised please state the name of the publication)?

AVAILABILITY

Days available to help	Times available 9 am – 5 pm	Any other information you would like to give concerning availability: Are you a car owner? YES/NO Are you a car driver? YES/NO Do you hold a valid driving license? YES/NO
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

SOCIAL INTERESTS/ACTIVITIES

Please give details of your social interests/activities

EDUCATION, TRAINING AND QUALIFICATIONS

Please give details of any current employment and any past employment, which you feel is relevant to your application. Please include any experience as a volunteer.

REHABILITATION OF OFFENDERS ACT 1974

The Hospice is exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act by virtue of the Rehabilitation of Offenders Act (Exceptions) Order 1975. You must declare any convictions you may have had including convictions which for other purposes are 'spent' under the provisions of the Act. Any information given will be completely confidential and will not necessarily disqualify your application for becoming a volunteer.

Have you had any convictions?

Yes

No

Please provide details of any convictions on a separate sheet

REFERENCES

Please provide names and addresses of **two** people we can contact for a reference. These should be people who know you well and can comment on your suitability to undertake volunteer work. *They should not be family members.*

Name:

Name:

Address:

Address:

I hereby declare that the information given is correct and that the information contained herein may be used by Harris HospisCare *with St Christopher's* for the sole purpose for which it has been intended.

SIGNATURE: _____

DATE: _____

“Volunteers are vital in expanding the possibilities available to an organisation such as St Christophers. And expanding possibilities for patients and families is what our work is all about. We couldn't do it without volunteers.” *Barbara Monroe, Chief Executive.*

VOLUNTEER EQUAL OPPORTUNITIES MONITORING

Harris HospisCare with St Christopher's is committed to providing equal opportunities for people who volunteer at the Hospice. In order to maintain and evaluate our success in achieving this, we would very much appreciate you completing and returning this form with your volunteer information form.

The information you provide is for monitoring purposes only and will be kept confidential.

Volunteer Role _____
Full name _____
Gender (Female / Male) _____ Date of birth (DD/MM/YYYY) _____

Ethnic Origin (please tick appropriate box)	
White-British <input type="checkbox"/>	Asian or Asian British - Bangladeshi <input type="checkbox"/>
White-Irish <input type="checkbox"/>	Other Asian Background <input type="checkbox"/>
Other White Background <input type="checkbox"/>	Chinese <input type="checkbox"/>
Black or Black British (Caribbean) <input type="checkbox"/>	Mixed - White and Black Caribbean <input type="checkbox"/>
Black or Black British (African) <input type="checkbox"/>	Mixed - White and Black African <input type="checkbox"/>
Other Black Background <input type="checkbox"/>	Mixed - White and Asian <input type="checkbox"/>
Asian or Asian British - Indian <input type="checkbox"/>	Other Mixed Background <input type="checkbox"/>
Asian or Asian British - Pakistani <input type="checkbox"/>	Other Ethnic Background <input type="checkbox"/>

ABILITY/DISABILITY	
The purpose of the following questions is to seek to ensure that we are fully aware of any medical condition or disability which you may suffer from which may necessitate adjustments being made to accommodate that disability or medical condition.	
Do you consider that you have a disability?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you registered as disabled?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is there anything which you would wish to tell us about your disability?	

RELIGION (Please tick the box that represents your religion/faith)	
Christianity <input type="checkbox"/>	Buddhism <input type="checkbox"/>
Judaism <input type="checkbox"/>	Hinduism <input type="checkbox"/>
Islam <input type="checkbox"/>	Sikhism <input type="checkbox"/>
Other (please state)	

Thank you for completing this form. Please return it with your volunteer information form.

POSSIBLE VOLUNTEER ROLES AT HARRIS HOSPISCARE

Please see overleaf for a bit more information about some roles.

Please tick the tasks you would be interested in volunteering:

- Helping at a hospice shop
- Fundraising
- Gardening
- Office clerical tasks/*reception
- *Day Hospice – to include the following:
 - Hospitality/Information/General Support
 - General Nursing support
 - Supporting group work
- *Visiting volunteers
 - Staying with a patient at home, for an hour or two, to allow their carer to have a much needed break. This may involve assisting a patient with their mobility, medication or helping them to the bathroom or commode.
 - Preparing snacks or drinks for a patients whilst at their home.
 - Occasional social outings.
 - Collecting prescriptions.
 - Providing transport to clinical appointments.
 - Collecting or delivering equipment i.e. pressure-relieving mattress, zimmer frame or commode.
- *Transport volunteers
 - Driving patients to and from the hospice to attend appointments
 - Escorting patients on journeys
- *Bereavement support
- Welcoming/refreshments at events/meeting
- Your suggestion

If you are accepted for volunteering that involves contact with patients, you will be asked to complete a health questionnaire and the Hospice will undertake an enhanced Criminal Records Disclosure (CRB) check before you can start in your volunteer role.

**All volunteer roles with direct patient contact will be required to attend an eight week training programme to be held at the Hospice.*

It is OK to tick more than one suggestion!

MORE INFORMATION ABOUT VOLUNTEER ROLES

Administration volunteer
Administration volunteers help with filing, photocopying and maintaining records.
Bereavement Service volunteer
Bereavement volunteers (BSVs) provide support to people who have been bereaved. There is specific training for this role which consists of 40 hours over three months. Volunteers who undertake this training are expected to commit to 2 years in the role, and to provide a minimum of two face-to-face contacts per week. There are opportunities for BSVs who have worked with us to train as group facilitators and to work alongside our qualified staff.
Day Hospice volunteer
The Unit is open three days a week – Tuesday, Wednesday and Thursday. Volunteers working here will welcome patients, families, carers and visitors, offering tea, coffee and a 'listening ear'. Volunteers can also support the nursing team by assisting patients who spend the day in the Centre with feeding, or bathing and other activities. Volunteers work between 9.30am and 3pm. Some will act as information guides, helping people locate relevant information in written form or via the internet. <i>Day Unit volunteers will be expected to attend an 8 session training programme, and will take part in regular support groups with an experienced facilitator.</i>
Reception
Volunteer receptions work half days. They welcome visitors, answer the telephones and take messages. <i>Reception volunteers will be expected to attend an 8 session training programme, and will take part in regular support groups with an experienced facilitator.</i>
Visiting volunteers
Volunteer visitors spend time in patients' homes so that carers are able to have time to themselves for a couple of hours. <i>Visiting volunteers will be expected to attend an 8 session training programme, and will take part in regular support groups with an experienced facilitator.</i>
Drivers and escorts
Volunteer drivers drive patients who may be spending the day at the hospice or attending a clinic appointment, to and from the hospice. Sometimes they take patients to hospital appointments. When a patient needs an escort, volunteer escorts carry out this service. <i>Day Unit volunteers will be expected to attend an 8 session training programme, and will take part in regular support groups with an experienced facilitator.</i>
Fundraising volunteer
Volunteers work alongside our professional fundraisers organising and helping at fundraising events such as fetes. They sometimes collaborate with friends or work colleagues on a fundraising project of their own, or join others on an existing project.
Gardening
Garden volunteers help to keep the hospice gardens well-stocked, tidy and attractive.
Hospice shop volunteer
Volunteers can work with others under the direction of the shop manager in one of our six shops. The role involves receiving, sorting, presenting for sale and selling donated goods.