

**Cheadle Community Information & Resource Group**

**Application to Volunteer**

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| --- |
| Full Name: |
| Address: |
| Mobile No: |
| Landline No: |
| Email Address: |

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| We are currently recruiting for front desk volunteer roles. Would you be interested in this role? |

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| Tell us about any volunteering or work experience you have done |

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| Please give details of any experience, special knowledge, skills, personal qualities relevant to volunteering at Cheadle Library, you feel you could use |

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| Tell us briefly why you are interested in volunteering at Cheadle library. |

**When are you available to volunteer?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
| 9am – 1pm |  |  |  |  |  |  |
| 1pm – 5pm |  |  |  |  |  | **CLOSED** |

**Emergency contact details:**

|  |  |
| --- | --- |
| Name & relationship:Mobile/landline No: | Name & relationship:Mobile/landline No: |

Do you have any special requirements that we can help you with in order to make the application process easier for you?

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As part of our recruitment programme, we ask that you provide details of two people who you have known for at least two years and whom are willing to comment on your suitability for this voluntary role at Cheadle Community Library.

These can be character references but must not be from any of your relatives.

We will contact your referees requesting their views in writing on your suitability to volunteer at the library, and, in addition, possibly contact them by ‘phone if we need to clarify any comment.

All information is treated in complete confidence in line with GDPR regulations.

|  |  |
| --- | --- |
| **Referee 1** | **Referee 2** |
| Full name: | Full name: |
| Address: | Address: |
| Daytime Tel/Mobile No: | Daytime Tel/Mobile No: |
| Email Address: | Email Address: |
| How do they know you: | How do they know you: |

Thank you.

**Please note you need to sign the declaration below and place your application in an envelope marked for the attention of Cheadle Community Library (Applications - Margaret) and either hand in at library or post to 17 High Street, Cheadle, Stoke on Trent, Staffs, ST10 1AF**

**Privacy Notice**

Cheadle Library is a community managed library and collects and holds information you provide for purposes connected with your voluntary service, including this application form. The sort of information we will hold will relate to your voluntary activities. It may include information for expenses, references, contact names and addresses, training and may include some health details and information about the activities you have undertaken and where. The purpose of which is to manage your role as a volunteer.

We may also keep information about your health for the purposes of; compliance with our health and safety obligations; for considering how your health affects your ability to do volunteer activities and, if you are disabled, any adjustments we need to make to assist you.

If you need to know what information is kept about you, then we will tell you and explain why it is kept.

The information we hold will be for management and administrative use only.

We will retain this information throughout your time volunteering with us. If you choose to finish volunteering, your information will be kept for 18 months and then confidentially destroyed.

Your name and address details together with your email address will be passed to Staffordshire County Council in order for them to issue to you your library computer log on permissions.

Your details will be kept in accordance with the General Data Protection Regulations (GDPR). They will be held securely and confidentially. They will be accessed by authorised personnel only.

**I declare the information I have provided on this application form is true.**

**Signed: Date:**