



**West Cheshire Foodbank**  
Unit 3/4 Stanney Mill Industrial Estate  
Dutton Green  
Chester  
Cheshire  
CH2 4SA

**T** 0151 355 7730  
**E** info@westcheshire.foodbank.org.uk  
**W** www.westcheshire.foodbank.org.uk

## Volunteer Application Form

Thank you for your offer to help with West Cheshire Foodbank. In order for us to process your application please would you answer the following questions:

*(If you have any questions about your application or would like help completing it please contact Lindsay Burghall).*

Date; \_\_\_\_\_

Title: \_\_\_\_\_

Full Name: (BLOCK CAPITALS)

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Molbile/Tel No: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

### Next of Kin:

Name: \_\_\_\_\_

Tel No: \_\_\_\_\_

Relationship: \_\_\_\_\_

### References *(not family members please)*

#### *Referee 1*

Name: \_\_\_\_\_

Email/Postal address: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

#### *Referee 2*

Name: \_\_\_\_\_

Email/Postal address: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

### Contact in case of emergency (if different)

Name: \_\_\_\_\_

Tel No: \_\_\_\_\_

Relationship: \_\_\_\_\_

### I would be interested in helping regularly in the following area(s):

- |   |  |
|---|--|
| <input type="checkbox"/> Foodbank Centre            | <input type="checkbox"/> Warehouse                                   |
| <input type="checkbox"/> Maintenance/DIY            | <input type="checkbox"/> Assisting in the office                     |
| <input type="checkbox"/> Marketing/Public relations | <input type="checkbox"/> Fundraising                                 |
| <input type="checkbox"/> Supermarket collections    | <input type="checkbox"/> Delivery or Collections (using own vehicle) |

Specialist skills: \_\_\_\_\_

**I am available for:** *(please tick and circle as appropriate)*

- One off events i.e. Supermarket collections, Harvest food sorting, annual stocktake
- 1-4 hours a week **AM / PM** on: **Mon / Tues / Wed / Thurs / Fri / Sat**
- Full Day(s) on: **Mon / Tues / Wed / Thurs / Fri / Sat**
- Other: \_\_\_\_\_

Do you have any health problems that we should be aware of?      Yes  No

If yes, please give details:

Please tell us your previous work experience or qualifications:

Would you be willing to for us to submit for a DBS criminal record check, if required?      Yes  No

Do you have any criminal convictions (except those 'spent' under the Rehabilitation of Offenders Act 1974)?      (NB: this does not necessarily prevent you from volunteering)      Yes  No

If yes, please give details:

Please state your reasons for volunteering:

Please give us any information you think may be useful to us:

How did you hear about volunteering at West Cheshire Foodbank?

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Data protection: West Cheshire Foodbank will hold your details on file but will not release them to a third party.

I confirm that the above information is complete and correct. I consent to the processing of this data in the consideration of my application and during the course of my volunteering, if applicable.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Thank you!*

Please return completed form to: West Cheshire Foodbank, Unit 3 Stanney Mill Industrial Estate, Dutton Green, Chester, CH2 4SA