



Hollie Helpers Volunteering Form

Thank you for your interest in becoming one of our highly valued Hollie Helpers. Please take a few moments to fill in this form so we can best offer you volunteer opportunities which best suit your skills and availability.

Personal Details

Title	First name	Last name
Address		Contact number
		Email address

Motivation and experience

What are your reasons for wishing to volunteer for the Hollie Gazzard Trust?
What work experience and relevant skills do you have (Please provide details)?

Availability

When would you be available? (Please tick all that apply)	Monday-Friday daytime Monday-Friday evening Weekend – daytime Weekend – evenings School holidays only Term time only
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Transport

Do you have access to your own transport?	
If so, are you happy to use it in connection with your volunteering?	

Please indicate what area of volunteer work are you interested in (please tick all the roles that interest you below)?

- Being part of our Fundraising volunteer team, e.g. organising or helping at one of our fundraising events
- Source raffle or auction prizes for our events
- Set up and run a stall at a community event to represent the Hollie Gazzard Trust (e.g., Fresher Fairs), help will be provided
- Attend cheque presentations on behalf of the Hollie Gazzard Trust (training provided)
- Run/Set up a coffee morning / cake sale to raise funds / awareness
- Distribute our marketing materials within your local area to raise awareness
- Dropping off/picking up our collection tins/boxes at various venues (these are generally local to Gloucestershire)
- Other (e.g. specialist or professional skills you would like to offer on a voluntary basis – HR, etc)

Convictions

Some volunteering roles may be required to have a Disclosure and Barring Service (DBS) check and we therefore obliged to ask the following questions. Have you ever had any criminal convictions, conditional discharges, or cautions (if yes, provide details on a separate sheet)?	
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Referees

Please give contact details for two (not a relation) referees. Please supply email addresses wherever possible, to save us on postage.	
Referee 1	
Name	
Address	
Email	
Tel no	
In what capacity known	
Referee 2	
Name	
Address	
Email	
Tel no	
In what capacity known	

Declaration

Data Protection Act 1998

I understand that if I am successful the information provided will form part of my personnel record which will be retained for 2 years after I cease to be a volunteer. If I am not successful, I understand that HGT will retain the information for 6 months.

I confirm that the above information is correct. I understand that any false information or deliberate omissions will disqualify me from undertaking a voluntary role or may render me liable for dismissal.

Signature	Date
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Please send the completed form to **FAO of Fundraising Manager, Hollie Gazzard Trust, Corinium House, Barnwood Point Business Park, Corinium Avenue, Gloucester GL4 3HX** or email to **fundraising@holliegazzard.org**

Last Update – April 2021

Hope, passion & a life fulfilled

