FOR OFFICE USE

Volunteer Ref. # _____ Date _____

Volunteer Application Form

Thank you for your interest in volunteering with Renew Charity, a non-profit organization. All volunteer applications are reviewed with consideration of current volunteer opportunities. The information you provide will be stored in confidence under the provisions of the Data Protection Act. Your completed form will be held securely and confidentially. Only authorized staff will have access to your information.

Personal Details

Name: _____ Mr. ☐ Mrs. ☐ Miss. ☐ Ms. ☐

Postal Address: _____

County: _____

Telephone: (Home) _____ (Mobile) _____

E-Mail: _____

Birth-date: _____
Day / Month / Year

If you are involved with us as a volunteer and an emergency arises, whom should we contact?

Name: _____ Relationship: _____

Telephone: (Home) _____ (Mobile) _____

Equal Opportunities

Renew Charity is committed to equal opportunities and all volunteer recruitment decisions will be based on merit, suitability for the role and experience. All volunteer recruitment decisions will not be influenced by race, color, nationality, religion, sex, marital status, family status, sexual orientation, disability or age. Renew Charity fully endorses a working environment free from discrimination and harassment.

Renew Charity is committed to standards of excellence in Child Protection practices. Where your volunteer role may have direct contact with children, you will be required to complete a Background Check Authorization Form and you understand that a criminal background check is required which will be processed by an associate and/or staff member of Renew Charity.

Renew Charity shall not disburse any monetary benefits. You understand that you will receive no monetary benefits in return for your volunteer service and that Renew Charity may terminate this agreement at any time without prior notice for any reason. In the meantime, please complete the question below.

Have you ever been convicted of an offence in the United States or elsewhere?
Yes ☐ No ☐

If you answered yes, please provide details below

Your Skills and Interests

1. Have you ever done any voluntary work before? Yes ☐ No ☐
If you answered yes, please tell us a little about the experience.

2. Why do you want to volunteer now? What has motivated you to get in touch with us?

3. Do you have any particular skills or qualities that you could use in your voluntary work?

4. Are you applying for a specifically advertised position? Yes ☐ No ☐

If yes, please write the following; Role name _____
Reference #_____

5. What kind of voluntary work interests you?
(See an associate or a staff member for more information)

☐ Board of Management
☐ Parents Association
☐ Education Based Activities
☐ Project Based Volunteering
☐ Internship in the Headquarters Office
☐ Other

6. When are you available for voluntary work? ☐ Totally Flexible

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

7. How long do you intend to volunteer for? _____
(note that some opportunities demand a minimum time commitment, i.e. Board level roles)

8. Where do you wish to volunteer? _____
(County / City Area or Headquarters Office / Local Education Center)

9. How did you find out about volunteering with Renew Charity?

☐ Information / Outreach meeting
☐ Renew Charity Website
☐ Leaflet / Poster
☐ Word of Mouth
☐ Internet www._____
☐ Other _____
☐ A Volunteer Center
☐ Education Center
☐ Project Activity
☐ Media / Radio / Television / Newspaper

References

Name: _____ Relationship: _____

Place of Work: _____ Position: _____
(If applicable)

Telephone: (Home) _____ (Mobile) _____

E-Mail: _____

Name: _____ Relationship: _____

Place of Work: _____ Position: _____
(If applicable)

Telephone: (Home) _____ (Mobile) _____

E-Mail: _____

If you have any questions during completing this application form, please phone us at 586-467-5978 or e-mail us at contact@renewc.org. If you would like to find out more about Renew Charity, please visit us on our website at renewc.org

Is there any additional information you would like to bring to our attention?

I declare that the information I have provided is true. I hereby Release and Waive liability against Renew Charity, a non-profit corporation, its directors, officers, employees and agents, its successors and assigns, for any injuries or illness that I myself or my dependent may suffer in connection with any volunteer work and Renew Charity is not liable for any damage to my property or my dependent's property resulting from volunteer work.

Signed _____ Date _____

For office use only

Volunteer Position _____

Volunteer Interview _____

Volunteer Role Description sent _____

References Collected _____

Volunteer Start Date _____

Notes