

# Volunteer Application Form

Thank you for your offer to help with **Inspire Middleton**, at the Lighthouse Project or Middleton Central Foodbank, please tick...

In order for us to process your application please complete all sections of the form below; if you have any questions about this or would like help completing it please contact us.

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

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

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

Mobile No: \_\_\_\_\_

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

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

Nationality: \_\_\_\_\_

Age Group: <20 21-30 31-50 51-60 61-70 70+

Church attending: \_\_\_\_\_

## Contact in case of emergency:

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

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

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

## Availability: I am available for:

- One off events** i.e. Supermarket collections, etc.
- Full Time** (Monday-Friday)
- Full Day(s)** - day(s) \_\_\_\_\_
- 1-4 hours a week** - day(s) \_\_\_\_\_
- Other times** (please indicate) \_\_\_\_\_

## Roles:

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

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> <b>Foodbank</b>                             | <input type="checkbox"/> <b>Lighthouse Project</b>  |   |
| <input type="checkbox"/> Welcomer/meet & greet                       | <input type="checkbox"/> Reception                  | <input type="checkbox"/> Maintenance / DIY          |
| <input type="checkbox"/> Foodbank Co-ordination                      | <input type="checkbox"/> Support Team               | <input type="checkbox"/> Cleaning                   |
| <input type="checkbox"/> Food picker/packer                          | <input type="checkbox"/> Coffee Bar helper          | <input type="checkbox"/> General Helper             |
| <input type="checkbox"/> Warehouse helper                            | <input type="checkbox"/> Digital Champion/Computers | <input type="checkbox"/> Fundraising                |
| <input type="checkbox"/> Supermarket collections                     | <input type="checkbox"/> Help social/leisure groups | <input type="checkbox"/> Data Entry                 |
| <input type="checkbox"/> Assisting in Office/Admin                   | <input type="checkbox"/> Tutor/training             | <input type="checkbox"/> Marketing/Public relations |
| <input type="checkbox"/> Driver / Food Collector (using own vehicle) |   | <input type="checkbox"/> Any of the above.          |
| <input type="checkbox"/> Other...                                    |   |   |



## Lighthouse Project

S6 b/c Second Floor, Middleton Shopping Centre,  
 Limetrees Road, Middleton, M24 4EL

**Tel: 0161 643 1163**

info@inspiremiddleton.org.uk

Office use Only:

Application date:

Review date:

**Put Photo here**

This is necessary for  
 your application

Does not need  
 to be  
 a passport photo

## References

*(please note that neither referee should be a close family relation or a foodbank Employee)*

### Referee 1

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

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

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

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

How long have you know this person? \_\_\_\_\_

### Referee 2

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

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

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

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

How long have you know this person? \_\_\_\_\_

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:

Please indicate your reasons for volunteering:

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

Rehabilitation of Offenders Act 1974: Do you have any unspent convictions? Yes  No

If yes, please specify:

Please note that a conviction will not necessarily exclude you from volunteering with Middleton Central Foodbank / Inspire Middleton, but will be taken into account when assessing your suitability.

Data protection:

In accordance with the 1998 Data Protection Act, I agree that Middleton Central Foodbank / Inspire Middleton may hold and use personal information about me for volunteering reasons and to keep in touch with me. This information, including that contained in this form can be stored on both manual and computer files. It will be held securely and only accessed by authorised personnel.

**Declaration:**

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: \_\_\_\_\_

Signature of parent/guardian if applicant is under 18: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed form to:

**Lighthouse Project**  
S6 b/c Second Floor, Middleton Shopping Centre,  
Limetrees Road, Middleton, M24 4EL

*Thank you!*

Inspire Middleton, Registered Office: 18 Aylesbury Grove, Middleton, Manchester, M24 2TG -  
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