

VOLUNTEER APPLICATION FORM

Thank you for your interest in continuing to volunteer with Ribble Valley Foodbank. The questions below are to help us ensure that we have the right people in the right roles to support the development of the service.

If you have any questions about your application, or would like help to complete this document, please contact Rachel or Kathryn.

Your Details

Name: _____

Address: _____ Telephone: _____

_____ E-mail: _____

_____ Post Code: _____

Volunteer Role Request

Whilst we cannot guarantee that all roles will be available, we will ensure that as far as possible you will be offered a role that best matches your preference.

Please tick ☒ the box to indicate your preferred role,
And put a "2" in the box to indicate a preferred alternative if the first is not available.
Detailed descriptions of these volunteer roles can be found through the Foodbank Website.

- ☐ Food bank Centre Lead
- ☐ Signposting
- ☐ Refreshments
- ☐ Welcomer

- ☐ Picking & Packing
- ☐ Social Media co-ordinator
- ☐ Fundraising co-ordinator
- ☐ Warehouse

Do you have a preference for which location you work in?

Clitheroe ☐
Longridge ☐

Emergency Contact Information

Next of Kin

Name: _____

Telephone: _____

Relationship: _____

Contact in case of emergency

Name: _____

Telephone: _____

Relationship: _____

Your Availability

Whilst Foodbank Distribution centres will operate on a Friday, it is helpful to know if you have other availability during the week should alternate roles become available. Please indicate your typical availability each week using the boxes below.

Tick if available	<input type="checkbox"/>	Monday	<input type="text"/>	Write times normally available on that day	How many ½ days each month would you be available to volunteer?	1	<input type="checkbox"/>
	<input type="checkbox"/>	Tuesday	<input type="text"/>			2	<input type="checkbox"/>
	<input type="checkbox"/>	Wednesday	<input type="text"/>			3	<input type="checkbox"/>
	<input type="checkbox"/>	Thursday	<input type="text"/>			4	<input type="checkbox"/>
	<input type="checkbox"/>	Friday	<input type="text"/>				

When did you first start volunteering with Ribble Valley Foodbank?

Personal Data

Do you have any health issues relevant to the role?

Yes

☐

No

☐

If YES please give details:

Do you have any criminal convictions? (except those 'spent' under the Rehabilitation of Offenders Act)

Yes

☐

No

☐

If YES please give details:

Do you have any additional needs you feel we should know about?

Yes

☐

No

☐

If YES please give details:

Any Additional Comments

Signature

Thank you for taking the time to complete this form. Please sign here to confirm you agree to the statement below.

I certify that the information given on this form is accurate to the best of my knowledge. I understand that Ribble Valley Gateway Trust will store this information confidentially in line with General Data Protection Regulations (GDPR).

Signed..... Date.....

Completed forms should be returned by 15th December to
applications@rvgt.org.uk or paper copy to Kathryn or Rachel