|  |  |
| --- | --- |
| **Positive East Reference** | **PE/VOL/WEBform/** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **First Name** | |  | | **Surname** | |  | | | | | | | | | |
| **Contact Number** | | |  | | | | | **OK To leave Voicemail** | | | **Yes** |  | | **No** |  |
| **Email** |  | | | | **OK To email** | | | **Yes** | |  | **No** |  | | | |
| **Address Line 1** | | | |  | | | | | | | | | | | |
| **Address Line 2** | | | |  | | | | | | | | | | | |
| **Address Line 3** | | | |  | | | | | | | | | | | |
| **Postcode** | | | |  | | | | | | | | | | | |
| **London Borough** | | | |  | | | | | | | | | | | |
| **Can we write to you at this address?** | | | | **Yes** | | |  | | **No** | | | |  | | |
| **Date of Birth** | | | |  | | | | | | | | | | | |
| **Nationality** | | | |  | | | | | | | | | | | |
| **Are you living with HIV**  ***This will not affect your application*** | | | | **Yes** | | |  | | **No** | | | |  | | |
| **Do you consider yourself to have a disability?** | | | | **Yes** | | |  | | **No** | | | |  | | |
| **If ‘Yes’ please state** | | | |  | | | | | | | | | | | |

**In the event of an emergency, who should we contact?**

|  |  |
| --- | --- |
| First Name |  |
| Surname |  |
| Contact Phone Number |  |
| Relationship to you |  |

**We talk to people from many different communities.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you speak any other languages apart fromEnglish? | Yes |  | No |  |
| If ‘Yes’ please state |  | | | |
|  | | | |
|  | | | |
| Would you be willing to help out as an interpreter? | Yes |  | No |  |

Our volunteers are all individuals and choose to volunteer for many different reasons. Please, in your own words, tell us a little more about yourself and why you are interested in volunteering at Positive East? You may also choose to tell us about any work experience you have or previous Volunteering you have been involved with. Please feel free to attach a CV.

If you are volunteering to gain experience towards getting a job, changing career or entering further education, for example, please tell us more about your plans. This may help us find a volunteer role which could be useful for your CV.

|  |
| --- |
|  |

**Please indicate, in the table below, when you are free/available to volunteer?**

|  |  |  |  |
| --- | --- | --- | --- |
| Day | Morning | Afternoon | Evening |
| Monday |  |  |  |
| Tuesday |  |  |  |
| Wednesday |  |  |  |
| Thursday |  |  |  |
| Friday |  |  |  |
| Saturday |  |  |  |
| Sunday |  |  |  |

**How did you hear about volunteering at Positive East?**

|  |  |
| --- | --- |
| Via the internet? Which website? |  |
| Advert in a newspaper of magazine? If so, which one? |  |
| Through a volunteer bureau? If so, which one? |  |
| By using Positive East Services? |  |
| From a volunteer/staff member at Positive East? |  |
| Other? Please specify |  |

Because of the confidential nature of the work Positive East does, it is essential that we check the suitability of all applicants joining as volunteers. We require two character references from people who know you well enough to answer a few questions about you. They do not have to be professional references, or previous employers. However, it is better if the references don’t come from partners, relatives or people who live at the same address as you. You will also be required to apply for a Disclosure & Barring Service certificate - DBS [formerly known as CRB – Criminal Records Bureau check]. If you have any questions, concerns or worries about either of these things please contact **Stewart Turnbull** our **Volunteer Manager** to discuss this.

**Referee 1**

|  |  |
| --- | --- |
| **Name** |  |
| **Email** |  |
| **Contact Number** |  |
| **How does this person know you?** |  |

**Referee 2**

|  |  |
| --- | --- |
| **Name** |  |
| **Email** |  |
| **Contact Number** |  |
| **How does this person know you?** |  |

**We have a range of areas and services you can volunteer with, here at Positive East. For more information about what these roles involve please check out our website link:** [**http://www.positiveeast.org.uk/involved/roles.php**](http://www.positiveeast.org.uk/involved/roles.php)

***Please, select a maximum of 3 from the options below by marking your first choice: 1, second choice: 2 and third choice: 3. If you are unsure, have a chat with our volunteer manager.***

|  |  |  |  |
| --- | --- | --- | --- |
| **Volunteer Role** | **Choice** | **Volunteer Role** | **Choice** |
| **Information & Advice** |  | **Outreach & Testing Volunteer** |  |
| **Reception** |  | **Peer Support** [*You must be living with HIV for a minimum of 12 months to apply for this role*] |  |
| **Office Administration** |  | **Complimentary Therapist**  [*You must be on an accredited course or fully qualified with certification and insurance to apply for this role*] |  |
| **Finance** |  | **Gym/Yoga/Exercise/Dance**  [*You must have an accredited Instructor/Personal Trainer qualification & insurance to apply for this role*] |  |
| **Positive Eats Cafe** |  | **Trusts and Foundations Fundraising Research Volunteer** |  |
| **Garden** |  | **Counselling** |  |
| **Interpreter** |  | **Facilities** |  |
|  |  |  |  |
|  |  |  |  |
| **Not sure, I would like to have a chat about what is available** | | |  |

**Positive East**

**Statement of Confidentiality for Volunteers**

I understand that in carrying out my duties as a volunteer for Positive East, that I am likely to obtain confidential information. Confidential information means any information belonging to Positive East, related businesses or service users, other than information that is public knowledge. This also includes any information which an employee of Positive East or a fellow Volunteer passes onto me strictly confidentially.

I agree:

1. To keep confidential information, records and data secret and confidential at all times.
2. To maintain any documents, records, computer files and any another means of recording material which contains confidential information in a secure place at all times.
3. Not to disclose in any way or facilitate the disclosure of confidential information in whole or in part, to any third party, without the written consent of the Volunteer Manager.
4. To ensure that any information received from a third party deemed as confidential is passed to the Volunteer Manager. The provider of this information will be informed of this action and I will not keep it to myself.
5. Should my position be terminated, or I leave my Volunteer post with Positive East, I will not pass on any confidential information to a third party, either at the date of termination or at any time in the future.

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

**Signature**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Volunteer Manager**

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

**Signature**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Completed applications can be emailed or posted to:

**Stewart Turnbull | Volunteer Manager | volunteering@positiveeast.org.uk**

**Positive East, 159 Mile End Road London E1 4AQ**

***If you require further information about Positive East’s Volunteering opportunities, or you would like help completing this form, please contact Stewart on 020 7791 9308***

|  |  |
| --- | --- |
| **Name:** Please print: |  |

**Date started Volunteering**: Office use**:**  Just put a cross (**🗶**) in the appropriate box:

If you have any questions about the form, please contact Positive East’s Volunteering team. All information provided is totally confidential and will not be disclosed.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sex:** | | | | | | | | | | | | | **Age:** | | | | | |
| Male |  | Female |  | Trans |  | | Do not wish to disclose | | | |  |  | Date of birth (dd/mm/yy) | | | / / | Do not wish to disclose |  |
| **Sexuality:** | | | | | | | | | | | | | | | | | | |
| Heterosexual |  | Bisexual |  | Lesbian | |  | | Gay |  | Do not wish to disclose | | | |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Ethnic Group:** | | | | | | | | | |
| White – British |  | White – Irish | | |  |  | | |  |
| White – any other White background |  | If so, please state: | | | | | | | |
|  | | | | | | | | | |
| Mixed – White and Black Caribbean |  | Mixed – White and Black African | | |  | Mixed – White and Asian |  |
| Mixed – Any other mixed background |  | If so, please state: | | | | | | | |
|  | | | | | | | | | |
| Asian or Asian British – Indian |  | Asian or Asian British – Pakistani | | |  | Asian or Asian British – Bangladeshi |  |
| Asian or Asian British – Any other Asian background | | |  | If so, please state: | | | | | |
|  | | | | | | | | | |
| Black or Black British – African |  | Black or Black British – Caribbean | | |  |  | | |  |
| Black or Black British – Any other Black background | | |  | If so, please state: | | | | | |
|  | | | | | | | | | |
| Chinese |  |  | | | | | | | |
| Other ethnic group | | |  | If so, please state: | | | | | |
|  | | | | | | | | | |
| Do not wish to disclose ethnicity |  |  | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Employment:** | | | | | | | | | | | | | |
| Full-time/self employed |  | Part-time |  | Unemployed |  | Retired |  | Student/Training scheme |  | Unemployed |  | Never worked |  |
| Primary carer |  | Incapacity benefit |  | Do not wish to disclose | | |  | Other, please state: | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Disability:** Do you consider yourself to be disabled or have any specific needs? | | | | | | |
| No |  | Yes |  | Do not wish to disclose |  |  |

|  |
| --- |
|  |

**FOR OFFICE USE ONLY**

|  |  |  |  |
| --- | --- | --- | --- |
| Reference Number: | | **PE/VOL/WEBform/** | |
| Application received date: | |  | |
| Interview date: | |  | |
| References sent date: | |  | |
| Reference 1 received date: | |  | |
| Reference 2 received date: | |  | |
| DBS | Yes | Date Valid from: | Expires: |
| Training offered/ completed: | |  |  |
| Entered into SF: | |  | |

N:

E:

M:

Notes: