

Volunteer Application Form

Please ensure that all parts of the application are completed to the best of your ability.

First Name:	_____	Last Name:	_____
Address:	_____		
Email:	_____	Mobile No:	_____
		Home Tel:	_____
For compliance of the Working Time Directive, we would appreciate it if you could indicate which age bracket you fall into:			
Under 16	<input type="checkbox"/>	16-17	<input type="checkbox"/>
		18+	<input type="checkbox"/>

Have you got what it takes to be a great Imperial Volunteer?

Tell us 3 top qualities you have that will make you a great addition to our team:

Tell us 3 words that you think best describe you:

How does the role you are applying for with Imperial fit into your career / future?

What have you been studying? List below your last 2 places of education / training, starting with the current or most recent.

Name & address of school or college	Qualification achieved or being studied

What have you been up to? Please use this space to tell us about your most **relevant** work experience. This doesn't necessarily have to be your most recent employment or voluntary placement.

Name of employer and type of business:	Position:	Rate of pay:	Dates of employment:
What were your duties?		Reason for leaving:	
Manager's Name:	Telephone no:	Email:	

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What else have you been involved in. (for example Community work /sports teams/work experience)

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Are you coming back to us? (If you have previously worked for us, please tell us when and your reason for leaving)

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Who'll vouch for you? Please give us the names of 2 people (not related to you), who can be contacted to provide a reference for you. At least one should be work related. If this is your first job, please give a tutor / lecturer's name.

Name:	Telephone Number:	Email:	How do you know this person?

Do you consider yourself to have a disability: **yes/no**

If yes, please provide details below:

Do you have any pre-existing injuries (eg. sprains) **yes/no**

If yes, please provide details below:

Do you have any medical conditions that we should be aware of? (eg. asthma, diabetes) **yes/no**

If yes, please provide details below:

Do you suffer from any phobias? **Yes/no**

If yes, please provide details below:

Now for the formal part:

Have you ever been convicted of a criminal offence which is not a spent conviction within the terms of the Rehabilitation of Offenders Act 1974? If yes, please give full details.

My signature confirms that all the information given on this application form is true and complete. I understand that any falsification or deliberate omissions may disqualify my application or lead to my dismissal. I understand that my employment is subject to references that are satisfactory to the Imperial bird of prey academy.

Signed:

Date:

Thank you for applying to join our team! Best of luck!