**Volunteer application form**

To have direct contact with young people you will need to provide two references and be willing to complete safeguarding training. The training will be of no cost to you. When you have completed this form please email it to admin@passion-shepshed.co.uk or print it out and pop in and see us.

**Personal Information**

|  |  |
| --- | --- |
| Full name |  |
| Former name(s)(if applicable) |  |
| Date of Birth |  |
| Home AddressPostcode |  |
| How long have you livedat this address? |  |
| Previous addressPostcode |  |
| Telephone number |  |
| Church attended (if any) |  |
| Name of Minister |  |

**Previous Experience**

Please provide details of any previous experience of working with children and young people.

|  |
| --- |
|  |

**Reference 1**

|  |  |
| --- | --- |
| Full name |  |
| AddressPostcode |  |
| Telephone number |  |
| Relationship to you |  |

**Reference 2**

|  |  |
| --- | --- |
| Full name |  |
| AddressPostcode |  |
| Telephone number |  |
| Relationship to you |  |

By signing below, I hereby certify that all information provided is true and correct to the best of my knowledge. I understand that providing false information may result in my application being rejected.

|  |  |
| --- | --- |
| Signed |   |
| Date |  |