





Please complete all sections (excluding Volunteer Manager / Coordinator checklist) and return this form by22 January 2016 to:St Kilda Work Parties, The National Trust for Scotland,<br/>Balnain House, 40 Huntly Street, Inverness, IV3 5HR<br/>Email: StKildaInfo@nts.org.uk

No deposit should be made with this application.

Due to the large number of applications received, it will not be possible to notify unsuccessful applicants unless a stamped, self-addressed envelope is enclosed with your application.

Volunteer Role		St Kilda Work Party Member						
About You								
Title								
Gender (please tick)	□ Female	<u>,</u>	□ Male	□ Transgender	□ Oth	er	□ Ui	ndisclosed
First Name (s)								
Surname								
Address								
Postcode								
Country				Date of Birth				
Primary Telephor	ne Number							
Secondary Telephone Number								
Email Address								
Have you previously volunteered with the Trust?					$\Box$ Yes		🗆 No	
Are you normally resident in the UK? (please tick)					$\Box$ Yes		□ No	
If no, please state your country of residence								
I have the right to work in the UK and/or a visa that allows me to work in the UK. Please tick to confirm.								
<b>Emergency Cont</b>	act							
Name								
Relationship								
Primary Telephor	ne Number							
Secondary Teleph	one Numbe	er						









#### **Other Information**

Do you have any health issues/disabilities that we should be aware of,	
or that may impact on your mobility / ability to carry out your volunteer role?	□ Yes
If yes please detail below	

🗆 No

In the interests of your own safety and that of the Work Party, an honest response is vital and need not prevent you taking part. It is a condition of acceptance for the Work Party volunteers that they each complete a detailed health questionnaire; this will be included with the Information Pack sent to all successful applicants.

Do you have any allergies that we should be aware of? (i.e. medicines, yes, please detail below.	foodstuffs etc.). If	□ Yes	□ No
Please list any dietary requirements (e.g. vegetarian, fish-eating veget	tarian etc.)		
Data Protection Statement			
The National Trust for Scotland is a registered data controller for the purposes of the Z8526377). The National Trust for Scotland respects your privacy and will not discle consent. By providing your signature below, you consent to the National Trust for Scotland data) that may be collected from you for the purpose of your application and collating statistical information. Our full Privacy Policy can be found on our website	ose your personal data to cotland processing any pe l, if successful, your regist	any third party w rsonal data (inclu	ithout your ding sensitive
Signature	Date		
If completed electronically, I give my consent to the National Trust for Scotland to p form. Please tick to confirm.	process the personal data ş	given in this	
Opt Out Section			
If you are <u>not</u> happy for the National Trust for Scotland to send you communications please tick this box.	related to volunteering a	and the Trust,	
If you are <u>not</u> happy for the National Trust for Scotland to hold and use photographs tight this how	of you in your volunteer	role(s) please	

tick this box.

Normally, the names and addresses of volunteers on each Work Party will be circulated as a means of introduction and to enable possible sharing of transport. If you are not happy for your personal information to be circulated in this way, please tick this box.

Volunteer Manager/Co-ordinator Checklist (for NTS Office Use Only)					
Place confirmed on which Work Party?	Work Party 1	Work Party 2	Work Party 3		
Work Party / Volunteering Dates	Start Date	End Dat	e		
Volunteer Manager Name					
Volunteering Department Use Only	Date Processed:				









#### **Your Experience**

Please give details of any relevant work experience you may have in building maintenance, archaeology, drystane dyking etc (including experience on any Work Parties).

Please give details of any other specific skills or abilities as appropriate, including experience on any Work Parties (e.g shop work, tour guide, bird survey etc).

Please specify any activities in which you regularly participate that require a degree of physical fitness

Please give an indication of your hill walking capabilities, including map reading and navigation skills

Please detail any relevant experience of working in / with a small group



the National Trust for Scotland Urras Nàiseanta na h-Alba a place for everyone àite don h-uile duine





St Kilda Conservation Work Parties 2016 Application Form

Why do you want to visit St Kilda as part of a Work Party?

What is your occupation?

### Work Parties 2016

Please indicate for which Work Parties you wish to be considered, in order of preference:

 $1 = 1^{st}$  choice  $2 = 2^{nd}$  choice x = I am unable to volunteer for this Work Party

St Kilda Work Party 1 (18 May - 1 June 2016)

St Kilda Work Party 2 (1 June – 15 June 2016)

If you are applying as a group of two or more persons, please give the names of the others in your group

Accommodation is provided in single-sex rooms - please confirm if you require a male or female place.

□ Male

 $\Box$  Female







# **Strictly Confidential - Equal Opportunities Monitoring**

The National Trust for Scotland is committed to the principles of Equal Opportunities. The information you provide on this form will be used for statistical analysis only. All information is required; however you may select the 'Undisclosed' box for each question.

Do you consider your	rself to come fron	n an ethnic minor	ity group?				
□ Yes		□ No			□ Undisclosed		
If yes, please provide	details:						
Do you consider your	valfta hava a dia	ability2					
		•		_	_		
□ Yes		□ No					
If yes, please tick all t	hat apply:						
$\Box$ Mobility	$\Box$ Mobility $\Box$ Visual		□ Hearing		ıl Health	$\Box$ Other	
If other, please specify	y:						
What is your employ:	ment status?						
□ Full-time	🗆 Part-ti	ime 🗆 Student		: 🗆 t		Undisclosed	
$\Box$ Self Employed	□ Self Employed □ Unemp		ployed		$\Box$ C	Other	
If other, please provide details:							
How did you hear about this opportunity with the NTS?							
□ Internet		$\Box$ Word of Mouth			□ Press/Magazine		
□ At Property		□ Social Media			$\Box$ Other		
If other, please specify	y:						
		Date o	f Completio	n			

Please return this form along with your completed St Kilda Work Party application form. The information on this form will be retained separately and anonymously.