



healthy working animals
for the world's poorest communities

Volunteer Application Form

Thank you for the interest you have shown in volunteering for the Brooke. To help us identify an opportunity that is most appropriate to your skills and availability, we would be grateful if you could complete the following form.

Name	
Address	
Contact phone number	
Email address	
What kind of commitment would you like to make? (i.e. weekly, monthly, ad hoc basis...)	
Please give a rough indication of your level of IT experience. (basic/intermediate/advanced)	Excel ____ PowerPoint ____ Word ____ Outlook ____ Other _____ Overall level: Basic ____ Intermediate ____ Advanced ____
Have you worked with a database before? If yes, please specify.	
Do you have any particular skills which you think might be of use?	
Have you volunteered for a charity before? If so, please give details.	
Are you currently employed? If so, please supply job title.	
What previous work experience have you got?	
What kind of task would you like to be involved in as a volunteer?	
Why have you chosen to volunteer for the Brooke?	

Referees

Please provide details of two referees we may contact should your application be successful.

Name	
Address	
Contact phone number	
Email address	
Relationship to you	

Name	
Address	
Contact phone number	
Email address	
Relationship to you	

Asylum and Immigration Act 1996

To ensure compliance with the Asylum and Immigration Act 1996 all offers of employment are subject to applicants providing evidence of their eligibility to work in the UK at the offer stage.

Please confirm whether you are eligible to work within the UK

Thank you for answering these questions. The information that you have provided will help us to ensure that we meet your volunteering needs as well as our own. All personal information will be kept confidential. We hope you understand that we don't always have suitable volunteering opportunities in our office, but we will keep your information on file and, if an appropriate opportunity arises, you will be invited to the offices for an informal chat.

Signature: _____ Date: _____

I understand that this information will be used only for volunteering purposes and, if I am successful in my application, this document will be placed on my file, in line with the Data Protection Act 1998. If my application is unsuccessful it will be stored securely for a period of 6 months and then destroyed.

Please return this form to Emma Harrison at:

The Brooke, 5th Floor, Friars Bridge Court, 41-45 Blackfriars Road, London, SE1 8NZ, or by email to volunteering@thebrooke.org

If you have any queries about this form or would like to have a chat about volunteering, please contact Emma on 020 7653 5893.

This section is only to be completed on your first day in the office should you be successful in your application for a volunteering opportunity with the Brooke.

Do you have a disability* or medical condition that the Brooke should be aware of?

If so, please provide details below:

Details of disability or medical condition:

**Defined by the Disability Discrimination Act as "a physical or mental impairment which has a substantial and long term adverse effect on the individual's ability to carry out normal day to day activities".*

Next of kin

Who should we contact in the event of an emergency?

Name	
Relationship	
Address	
Post code	
Telephone	
Email	

Optional. Please feel free to give contact details for a second next of kin:

Name	
Relationship	
Address	
Post code	
Telephone	
Email	

Language Skills

Do you speak/write moderately or fluently in any other language other than English? If so please state here. (As Brooke is an international organisation, it may require your bilingual skills)

Data protection: Information from this application may be processed for purposes registered by the Employer under the Data Protection Act 1998. Individuals have, on written request [and on payment of a fee] the right of access to personal data held about them. I hereby give my consent to the Brooke processing the data supplied in this form.

Signature of Volunteer: _____

Date: _____