

Volunteer Application Form

The information you provide is strictly confidential and we will use it to administer any volunteering you do with us. Your signature gives us consent to hold the details on this form on a database for volunteering purposes only. All information is held in accordance with the Data Protection Act 1998. The Company Secretary is Data Controller under the Act. You have the right to make a formal request in writing for access to personal data held about you to inspect it and have it corrected if it is wrong.

Personal details

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Name	Telephone number (home)
Permanent Address – please let us know if you have an alternative address (eg term time)	Telephone number (mobile)
	Postcode
Email	Date of birth*
	/ /
* Optional except where a specified age range is require	d by the role applied for
Emergency contact details: Who should we conta	act in an emergency?
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Name	Telephone number (with area code)
	(
Deletionship to you	Talanhana numbar (mahila)
Relationship to you	Telephone number (mobile)

Health				
Do you have any health conditions or disabilities of which we should be Yes No				
aware?	<i>,</i> П			
If yes, please give details:				
Criminal convictions				
Have you ever been convicted or charged with a criminal offence? Yes No	о 🗌			
(You do not need to disclose any convictions which are considered 'spent' under the Rehabilitation of Offenders Act 1974)				
If yes, please provide details of the criminal offence(s) including dates and sentences:				
A prior criminal conviction or the fact that you have been charged with a criminal offence will not automatically prevent you from volunteering with The National Autistic Society but failure to disclose relevant information or providing false or misleading information may result in immediate dismissal.				
Additional information				
Where did you hear about this volunteering opportunity?				
About yourself				
The following questions will help us to determine whether this is the right volunteering opportunity you.	y for			
What volunteer role are you interested in?				
What skills and qualities do you have that would be useful in this volunteer role?				
Why do you wish to volunteer with The National Autistic Society?				

References

We need two references from people who have known you for at least two years.	Ideally, this
should be someone who has known you through work (paid or voluntary) or education.	We cannot
accept references from family members.	

	Reference 1	Reference 2
Name		
Email address		
Telephone		
Postal address		
Postcode		
In what capacity does this person know you?		
How long have they known you?		

Personal declaration

This form requests that you provide us with both personal data and sensitive personal data. Sensitive personal data includes, but is not limited to, information related to your health, racial and ethnic origin and criminal convictions. By providing us with any personal data and sensitive personal data, you agree that The National Autistic Society may hold and use your personal data and sensitive personal data to consider your suitability to be a volunteer, manage your role as a volunteer and to keep in touch with you. This information, including the information contained in this form, can be stored by us on both manual or computer files. It will be held securely and only accessed by authorised personnel within The National Autistic Society or, exceptionally, provided to third parties where required by law (e.g. to government bodies and law enforcement agencies). Further details on our privacy statement and information about how to contact us with questions about our use of your data can be found at www.autism.org.uk

By submitting this form (i) I agree to abide by all National Autistic Society policies and guidelines made available to me, including those relating to volunteering and health and safety; (ii) I will notify The National Autistic Society of any changes in circumstances that may affect my volunteering; (iii) I agree to The National Autistic Society contacting and requesting a reference from the referees referred to above; and (iv) I acknowledge that I am volunteering entirely at my own risk and that The National Autistic Society shall not be liable in any way for any injury or loss that might occur as a result of my activities other than as a result of The National Autistic Society's negligence.

I confirm that the answers that I have provided on this form are true.

Signature	Date
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The National Autistic Society 393 City Road London EC1V 1NG www.autism.org.uk