



Community Transport
(Stockport) Ltd

APPLICATION FORM

To become a volunteer with Easy Go Community Transport

Personal Details

Preferred Title (e.g. Dr, Mr, Mrs, Miss, Ms)	Forename(s)	Surname
Contact address	Preferred contact telephone number (Work/Home/Mobile)	
	Other telephone number (Work/Home/Mobile)	
Postcode	DOB:	E-mail address

Which of the following roles are you interested in?

- Administrative/Office/Clerical
- Driving Minibuses/Passenger Assistance
- Providing general support on site e.g. cleaning vehicles
- All volunteering opportunities within Easy Go CT

Please state previous relevant experience

Employing organisation (s) name:	Volunteering organisation (s) name:
Brief details about your role(s):	Brief details about your role(s):
<i>(Please continue on a separate sheet if necessary)</i>	<i>(Please continue on a separate sheet if necessary)</i>

When are you available to volunteer?

Where did you hear about us? *Please specify the source or publication for example, newspaper, professional journal, internet, word of mouth, careers fair etc.)*

Criminal Convictions.

All posts within Easy Go CT are exempt from the Rehabilitation of Offenders Act 1974. You are required to declare any pending prosecutions or convictions you may have, even if they would otherwise be regarded as "spent" under the Act. You must also declare any cautions or bind-overs. (Continue of separate sheet if necessary).

Date	Offence	Sentence	Court

Safer Recruitment and Selection

As the volunteering opportunity which you are applying for provides substantial direct / indirect access to young people / vulnerable adults, your appointment will be subject to rigorous vetting processes including checks by the Criminal Records Bureau and other relevant bodies.

Have there ever been any allegations of abuse, malpractice or professional misconduct made against you?

Yes No

(If yes, please provide details, together with the outcome)

Have there ever been any allegations of harassment against you?

Yes No

(If yes, please provide details, together with the outcome)

References

Please give names and addresses of **Two** references, not related to you, who are willing to comment on your suitability to volunteer.

Name	Name
Position/Relationship to applicant	Position/Relationship to applicant
Address	Address
Telephone no.	Telephone no.

Data Protection Act 1998: Community Transport will process the information provided on this form for statistical purposes. If your application is successful, a copy of this application will be forwarded to the programme, schools or college which you have been linked to for their records.

Declaration: I declare that the information I have given is, to the best of my knowledge, true and correct and may be stored and used in accordance with Easy Go CT's volunteer policy and procedures. I understand that canvassing or giving false information will disqualify my application, may be used in the detection and prevention of fraud or, if discovered after appointment, may be grounds for dismissal.

Applicants Signature	Date
Name <i>(please print)</i>	

To ensure we are meeting our commitment to equality we will detach this equal opportunities monitoring section on receipt of this form so that your ethnic origin, age, gender or disability will form no part of the initial short listing process. Once this exercise has been completed, your personal details will be retrieved, for monitoring and correspondence purposes.

Opportunity: Volunteer Post	Gender: Female <input type="checkbox"/> Male <input type="checkbox"/>
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Cultural Ethnic Origin

Please place a cross in the relevant box that describes your cultural ethnic origin.

Asian or Asian British

- Indian
 - Pakistani
 - Bangladeshi
 - Any other Asian background, please specify
-

Black or Black British

- Caribbean
 - African
 - Any other Black background, please specify
-

Chinese or other Ethnic Group

- Chinese
 - Any other Ethnic group, please specify
-

Dual Heritage

- White and Black Caribbean
 - White and Black African
 - White and Asian
 - Any other mixed background, please specify
-

White

- British
 - Irish
 - Other, please specify
-

Disability

The Disability Discrimination Act 1995 defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long-term effect on his or her ability to carry out normal day-to-day activities.

Do you consider yourself to be a disabled person under the terms of the Disability Discrimination Act? Yes
 No

Employment Equality

In line with the Employment Equality (Religion or Belief) Regulations 2003, we are required to ask the following question to identify if any adjustments need to be made to enable us to meet your needs.

Age

Please place a cross in the relevant box that describes your age group.

- | | |
|---|---|
| <input type="checkbox"/> 16 – 25 years' old | <input type="checkbox"/> 46 – 55 years' old |
| <input type="checkbox"/> 26 – 35 years' old | <input type="checkbox"/> 56 – 65 years' old |
| <input type="checkbox"/> 36 – 45 years old | <input type="checkbox"/> 66+ years old |