

Quaker Homeless Action  
 Quaker Mobile Library  
 London



Volunteer Application Form

* Surname:	* First Name:	Address and Post Code:	* Home Telephone:
Date of Birth:			

\* Mobile Phone: \_\_\_\_\_ Do you text? Yes/Not yet

\* Email: \_\_\_\_\_

*\*These details will be shared with other volunteers to facilitate communication.*

Please give a reference, whom we can contact and who has known you for at least two years:

Referee's Surname:	First Name:	Referee's Address and Post Code:	Referee's Telephone:

Email: \_\_\_\_\_

Have you participated in other relevant voluntary work? If so, please describe:

What skills and experience do you have, which may be useful?

Do you have any special needs or health issues it would be helpful for us to know about?

*Please provide details of any criminal convictions on the reverse of this page. This information will be kept confidential but may be shared with QHA Council and will not necessarily prevent you from volunteering with the Quaker Mobile Library.*

If you intend to help with driving please attach photocopy of your driving license and give details of any motoring offences over last 3 years.

At which times could you be available for volunteer work?

Saturday Morning	Saturday Afternoon	Monday Morning	Tuesday Evening

Signed \_\_\_\_\_ Date \_\_\_\_\_

Please return the completed form to: Kate Mellor, QHA, PO Box 7105, Poole, Dorset BH15 9EJ