

Clanrye Group

Volunteer Registration Form



GENERAL DETAILS

Full name:

Address:

Postcode:

Tel number: Mobile number:

Email address:

Please select your current employment status:

Working full time

Working part time

Not currently working

Retired

AVAILABILITY

When would you be available to volunteer with us? (Please indicate times e.g., 2- 4pm)

Days	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
am							
pm							

EMPLOYMENT HISTORY

What previous work experience, including voluntary work do you have?

FURTHER INFORMATION

What motivates you to want to volunteer?

What skills, knowledge and experience do you feel you could bring to a voluntary role in our organisation?

Please indicate what you would like to get in return for volunteering with Clanrye Group, if anything?

We at Clanrye Group aim to be an inclusive and supportive organisation. As per the Disability Discrimination Act 1995, a person is considered to have a disability if he/she has “a physical or mental impairment which has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities.” Please note it is the effect of the impairment, without treatment, which determines if an individual meets this definition of disability.

Do you consider that you meet this definition of disability?

YES

NO

Are there reasonable adjustments that we could make that would enable you enjoy a volunteering role with us? If yes please specify:

REFERENCES

Please provide names and addresses of two people who we could contact for a reference (this person should not be a relative and should know you for at least 2 years).

Referee 1

Name:

Address:

Postcode:

Tel Number:

Email:

Referee 2

Name:

Address:

Postcode:

Tel Number:

Email:

Please return this completed form to:

Holly Clements
Clanrye Group
Drumalane Mill
The Quays
Newry, BT35 8QS

or holly.clements@clanryegroup.com

Thank you for your interest, we will be contact with you shortly to discuss your interest in volunteering with Clanrye Group.

HOW REPRESENTATIVE ARE WE?

Clanrye Group is committed to ensuring that its services are accessible to a diverse range of groups and people. We would therefore appreciate it if you could complete the following information for monitoring purposes only to help us gain an overview of the diversity of our volunteers. This helps us identify volunteers that we would like to target in our next recruitment campaigns. All information will be kept confidential and anonymous.

Are you: Male Female

You are asked to voluntarily provide information on your marital status, dependant responsibility and community background.

Please indicate your age group:

18 – 25 years 26 – 39 years 40 – 59 years 60+

Do you consider yourself to have a disability?

Under the Disability Discrimination Act 1994, an individual is considered to have a physical disability if they have a physical impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities.

Yes No

Community Background

I am a member of the Protestant community

I am a member of the Roman Catholic Community

I am member of neither the Protestant or Roman Catholic Community

Which of the following groups do you consider you belong to?

White Black African Bangladeshi Mixed Ethnic

Chinese Black Caribbean Pakistani Other

Indian Black other Irish Traveller

How did you hear about us?

Word of mouth Friend / Relative

Publicity (Please specify) _____ Other, please specify _____

Access to this information will be strictly controlled and will only be used for equal opportunity monitoring purposes.