

# Volunteer Application Form



Name:

Address:

Postcode:

Home Tel:

Mobile:

Email:

Occupation:

Interests:

**Post applying for:** Citizen and Community Advocate  Advocacy groups  Drop-in volunteer

Other:

**References:** Please name two people we can contact for a reference – one to be your employer, if applicable.  
(Please note we will only contact referees once you have been offered a position)

**Referee Name:**

Address:

Postcode:

Tel:

Email:

**Referee Name:**

Address:

Postcode:

Tel:

Email:

**Have you ever had any criminal convictions?**

Yes

No

Speak Out is exempt from the Rehabilitation of Offenders Act 1974

**Volunteering with Speak Out is subject to a DBS check**

Speak Out is committed to equality of opportunity and previous convictions will not necessarily bar an applicant from becoming a volunteer

Signature:

Date:

Please check this box if you are filling in this form electronically

**Brighton & Hove Speak Out, Brighthelm Centre, North Road, Brighton, BN1 1YD** [www.bhspeakout.org.uk](http://www.bhspeakout.org.uk)

**t: 01273 421 921 e: info@bhspeakout** **Brighton and Hove Speak Out** **@bhspeakout**

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