

Volunteer Application Form



Thank you for your interest in volunteering for Hearing Help Essex. Please take some time to fill in this form; this will help us to place you in the right Volunteer role. Unfortunately we cannot accept incomplete application forms, so if you have any difficulty filling in this form please call or email us on 01245 49347 or info@hearinghelpessex.org.uk for assistance.

Name:	
Address:	
Post Code:	
Home Telephone:	Mobile:
Email:	Date of Birth:
How would you prefer for us to contact you?	
Phone <input type="checkbox"/> Email <input type="checkbox"/> Letter <input type="checkbox"/> Text Message <input type="checkbox"/>	
Is there a particular role that you are interested in? <input type="checkbox"/> Hearing Aid Support Service Technical Volunteer <input type="checkbox"/> Hearing Aid Support Service Meet and Greet Host <input type="checkbox"/> Befriending Service or Home Visit Volunteer <input type="checkbox"/> Office Admin Support <input type="checkbox"/> Photographer <input type="checkbox"/> Trusteeship <input type="checkbox"/> Other (please specify).....	
Do you have use of a car?	
Do you hold a current driving licence?	
Do you have comprehensive insurance?	
Are you hard of hearing?	
Do you have relatives or friends who wear a hearing aid?	

Please give details of any experience / involvement with other voluntary organisations or relevant work experience.

Can you briefly describe why you are interested in working Hearing Help Essex Volunteer?

Please provide the details of two people who we can contact for references. We prefer that at least one of these references comes from a person with a professional background; For the second referee a personal references may be used.

Reference 1	Reference 2
Name:	Name:
Position or relationship to you:	Position or relationship to you:
Address:	Address:
Email:	Email:
Telephone:	Telephone:

For our information please could you tell us where you heard about Hearing Help Essex:

Disclosure and Barring Service (DBS)

Please be aware that we require all our Hearing Aid Support Volunteers to undergo a DBS check. This is because in the course of volunteering, volunteers may work with vulnerable adults. For further information please contact the office.

Important Information

Personal data that you provide to Hearing Help Essex will be held in accordance with the General Data Protection Regulation 2018 and Data Protection Act 1998. All HHE staff and Volunteers are bound by a confidentiality agreement.

Signature:

Date:

What Next?

Please return the form once completed and signed at the bottom of page 2 to:

Hearing Help Essex
Suite 2
158 Moulsham Street
Chelmsford
Essex
CM2 0LD

Or by email to: info@hearinghelpessex.org.uk

We endeavour to respond to all Volunteering applications within 5 working days.