



VOLUNTEER APPLICATION FORM

PERSONAL DETAILS

Name: (Mr / Mrs / Miss / Ms / Dr / Other) _____

Address: _____

_____ Postcode: _____

Home Telephone No: _____ Mobile Telephone No: _____

Email Address: _____

Age: _____ (Optional) **PLEASE NOTE Volunteers must be over 18 years for Health & Safety purposes**

VOLUNTEERING INFORMATION

How did you hear about Newcastle Dog & Cat Shelter's volunteering scheme? _____

Why do you wish to volunteer for Newcastle Dog & Cat Shelter? _____

VOLUNTEER INTERESTS

Please **CIRCLE** the areas of volunteering you are interested in:

DOG WALKING

CAT SOCIALISING

GARDENING

FUNDRAISING / EVENTS

ADMIN / OFFICE

DRIVER

SHOP (Wallsend/Heaton)

CARE HOME VISITOR

RABBIT SOCIALISING

COFFEE SHOP

VOLUNTEERING AVAILABILITY

Please state the times you are available for your volunteering role:

(Times for volunteering with the animals: Monday-Sunday 1pm-6pm)

(Times for Driving/Gardening: Monday-Sunday 8am-6pm)

(Times for Shop: Monday-Saturday 9am-4.30pm)

(Times for Events: Monday-Sunday- variable and flexible)

(Times for Care Homes: Monday- Friday 10am-12noon/ 2pm-4pm)

(Times for Admin: Tuesday-Thursday 9am-5pm)

(Times for Coffee Shop: Monday to Sunday 1pm-5.30pm)

MON: _____ TUES: _____ WED: _____

THURS: _____ FRI: _____ SAT: _____

SUN: _____

VOLUNTEERING EXPERIENCE / EMPLOYMENT DETAILS / MISC INFORMATION

Do you have any previous volunteering experience: (Please give details) If none, please state this.

Present employment details (Position, Employer Name, Address, and Contact Telephone No)

Will you need to be accompanied while performing your volunteering role? YES / NO

Please give details of any other Interests and skills:

Are you aware of any MEDICAL CONDITIONS / ALLERGIES which may affect your ability to undertake the volunteering activities you have indicated on this form? YES / NO

(If yes please give details) _____

YOU MUST DECLARE ANY CRIMINAL CONVICTIONS (except those spent under the Rehabilitation of Offenders Act 1974) If none, please state this

REFERENCES / EMERGENCY CONTACT INFORMATION

Please list 2 References (These references SHOULD NOT BE RELATIVES)

Name:	Name:
Address:	Address:
Postcode:	Postcode:
Telephone No:	Telephone No:
Relationship:	Relationship:

In case of an emergency, who should we contact?

Name:	
Address:	
Postcode:	
Home Telephone No:	Mobile Telephone No:
Relationship:	

Please list any other information you would like to be considered when we are reviewing your application:

DECLARATION:

Signed: _____ Date: _____

Please return this form to:

Newcastle Dog & Cat Shelter
Benton North Farm
Benton Lane
Newcastle upon Tyne
NE12 8EH

Thank you for completing this form.
 Due to limited resources, we will be unable to reply to unsuccessful applicants.