**VOLUNTEERING with Pilgrim Hearts Trust**

*Application form.*

**Your details:**

**First name: …………………………. Surname: …………………………..……………………….**

**Gender: …………….. D.O.B:……………… Email:………………………………….……………**

**Mobile: …………………………**

**Address:……………………………………………………………………………………..……….**

**Referee details:**

**Referees Name: (Or Name of your local church)**

**……………………………………………………………………..**

**Referee Address:………………………………………………………………………………….**

**Phone:............……………… Email:............………………………………………....**

**Signature:............………….. Date:............…………………………………………..**

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**How would you like to volunteer?** Please circle your choice/s from the following:

Drop In (at St Andrew’s, Priestwood) Tuesdays 11 am to 2 pm.

Drop In (at Bracknell Methodist Church) Thursdays 11 am to 2 pm

Administration help.

Mentoring a homeless person.

Driving.

Answering calls to our telephone helpline.

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**Qualifications & training.**

Have you a valid DBS check? YES / NO

If so, who did it? ……………………… and when was it done?……………………….

Do you have a valid First Aid qualification? YES / NO

Mental Health First Aid certificate YES / NO

Food Hygiene certificate? YES / NO

Safeguarding training YES / NO

***Continue on next page…..***

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**Previous relevant experience (for new applicants only)**

*This is a preliminary form to gauge interest. We will discuss it further with you and you will be given training.*

I agree to follow the guidelines and will work as requested by the organisers. I give permission for Pilgrim Hearts Trust to store my data.

**Signed……………………………………… Dated …………………………..**

***PLEASE POST TO:***

Pilgrim Hearts Trust, 24 YORKSHIRE PLACE, BRACKNELL, RG42 3XE

or scan and Email to **enquiries@pilgrimhearts.org.uk**