

SECTION ONE: YOUR PERSONAL DETAILS

Full Name (Including title)				Date of Birth	
Home Address (including Post Code)					
Correspondence Address (if different)					
Email Address					
Daytime Telephone No.			Evening Telephone No.		
Are you already a Member of Your Community Bank? (Y/N)		If yes, please detail your Membership Number here			

SECTION TWO: VOLUNTEERING ROLE

Role(s) Applied For	Tick for Yes
Customer Service (Admin & Phone)	
Customer Service (Face-to-Face)	
Finance (Credit Control & Loan Panel)	
Marketing	
Registered Officer (Board Director / Supervisory Committee)	

Preferred Location	Tick for Yes
Croydon – AMP House, Dingwall Road, Croydon, CR0 2LX	
Merton – Civic Centre, London Road, Morden SM4 5DX	
Sutton – Civic Centre, St. Nicholas Way, Sutton SM1 1EA	
Hill House (Sutton/Morden Borders) –Hill House, Bishopsford Road, Morden SM4 6BL	

Would you be happy to travel to another location within Croydon/Merton/Sutton? If so, where?

(if you are able to travel to any part of the borough please write 'ALL')

SECTION THREE – RELEVANT SKILLS AND EXPERIENCE

Please give details of your skills and experience relevant to this role, referring to the role description. (Relevant leisure and non-work interests or experience may be just as relevant as paid employment). (You can attach a CV to this application if you wish)

SECTION FOUR: YOUR REASON FOR VOLUNTEERING

Why are you interested in volunteering with us?

SECTION FIVE: YOUR AVAILABILITY

Please indicate (with a tick) your Preference of Time and Day/s

	Monday	Tuesday	Wednesday	Thursday	Friday	OTHER
AM						
PM						
Evening						

SECTION SIX: REFERENCES

Please give the names and contact details for 2 referees whom we can contact to support your application:			
Referee 1		Referee 2	
Name		Name	
Address		Address	
Email		Email	
Phone Number		Phone Number	
In what capacity do you know this person?		In what capacity do you know this person?	

SECTION SEVEN: YOUR HEALTH

Do you have any disability, health or medical condition that we should be aware of in order to keep you safe; or that we should take account of in planning your volunteering role?				
Yes		No		If yes, please provide details in the box below:

SECTION EIGHT: CRIMINAL RECORD

Do you have any criminal convictions/cautions (with the exception of fixed penalty traffic offences?)

Please note Previous convictions will not necessarily prevent consideration of your application to volunteer with us. However, if we later discover that you have not disclosed a criminal conviction; this will reflect on your honesty and integrity; therefore, we may decide to terminate your volunteer placement and refuse to give a reference**

Yes		No		If yes, please provide dates and details in the box below (use a separate sheet if applicable)
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SECTION NINE: HOW DID YOU HEAR ABOUT US?

Please tell us how you heard about this volunteering opportunity (Please tick one)

I am a Member	☐	Word of mouth/recommendation	☐	Promotional Leaflet	☐	Website	☐
Social Media	☐	at an Event	☐	Volunteering Agency	☐	Other:	☐

If Other, please provide details here:

SECTION TEN: DECLARATION

By signing below, I am confirming that 'I declare that all the above information is true and accurate'.

Signed: _____

Date: _____

Print Name: _____

Please return this form to:

Michael Wilson, CEO

Your Community Bank, 4th Floor, AMP House, Dingwall Road, Croydon CR0 2LX**Thank you for your interest in volunteering with Your Community Bank.****Once we receive your application, we will be in touch as soon as possible to discuss possible opportunities within the organisation.**