

**Volunteer Application Form**

**Name:**

**Email:**

**Phone number:**

**Address:**

We do many activities with a lot of opportunities for our volunteers. Our main focus is engaging with the public about their experience of health and social care, plus offer information and guidance. This would be a large part of your role with us. You will have the opportunity to work alongside staff members in our hub within the Galleries shopping centre, Bristol. We also ask that you support us with some administration duties within the hub. We ask that you commit to 2.5 hours one morning or afternoon per week for this role. There is also the opportunity to attend events and engage out and about within the community alongside staff members.

If this does not suit you, we do have a small number of health care skilled and experienced volunteers who represent us at meetings, are involved in specific projects or scrutiny and reporting of services, plus much more.

You will be able to get involved with many exciting and new things and we include everyone as much as possible with all our opportunities.

**How much time are you able to commit? Don’t worry if you cannot commit to 2.5 hrs per week, we can chat about this at your interview.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | **Please tick** |  | **Please** **tick** |
| **Monday** | 10.00am -12.30pm |  | 12.30pm-3.00pm |  |
| **Tuesday** | 10.00am -12.30pm |  | 12.30pm-3.00pm |  |
| **Wednesday** | 10.00am -12.30pm |  | 12.30pm-3.00pm |  |
| **Thursday** | 10.00am -12.30pm |  | 12.30pm-3.00pm |  |
| **Friday** | 10.00am -12.30pm |  | 12.30pm-3.00pm |  |

**Could you please outline your wishes plus, your skills and experiences:**

**Why would you like to volunteer for Healthwatch BNSSG, we try to help you achieve what you are looking for, this may be to gain experience to apply for employment or to meet people and give something back to the community?**

 **Do you have support or access needs (for example, do you have a disability, are you a carer, do you need a support worker when you volunteer?)**

**Please supply the names, addresses and phone numbers of two referees who know you well. e.g. previous employer, neighbour, previous volunteering project, etc. Please state how they know you. (Please note that these cannot be a relative.)**

|  |  |  |
| --- | --- | --- |
| Name | Email address | Relationship to you |
|  |  |  |
|  |  |  |

Please return the completed form to jacqui@healthwatchbnssg.co.uk or post to

Jacqui Reeves, Volunteer Co-ordinator, Unit UG21, Union Gallery, The Galleries, Bristol BS1 3XD