

Poole Volunteer Centre

Poole Advice Centre, 54 Lagland Street, Poole BH15 1QG
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www.poolevolunteercentre.org.uk



Volunteer Questionnaire

Mr. Mrs. Miss Ms. (circle one) Other

First Name Surname

How would you like to be addressed?

Address

..... Postcode

For Poole residents only. Which area of Poole do you live in? (e.g. Parkstone, Hamworthy etc).

Tel No: Fax No:

Mobile: Email:

When is the best time to contact you?

How did you hear about the Poole Volunteer Centre?.....

Which areas of voluntary work interest you? Please tick the appropriate box(es).

Animals	Homeless & Housing	
Art & Culture	Human & Civil Rights	
Children & Youth	International Aid & Disaster Relief	
Disability	Legal Aid & Justice	
Disaster Relief	Mental Health	
Domestic Violence	Millennium Volunteers	
Drugs & Addictions	Museums	
Education & Literacy	Politics	
Elderly	Prisoners & Ex-Offenders	
Employment	Race, Ethnicity & Refugees	
Environment	Religion	
Families	Sport & Outdoor Activities	
Gay, Lesbian, Bi & Transsexual	Women's Groups	
Health, Hospital & Hospices	<i>Other (please give details)</i>	
Heritage	

Which type of activity are you interested in? Please tick the appropriate box(es).

Administration	Entertainment
Advice Work & Counselling	Finance Work
Architecture & Building Work	Fundraising
Art	Hostel Work
Befriending	Languages
Business & Management	Legal Work
Campaigning & Lobbying	Marketing, PR & Media
Caring	Practical Work & DIY
Catering	Retail & Charity Shops
Community Work	Teaching & Training
Computers & Technology	Under 16 Volunteering
Driving	Other (please give details):.....

In what locations are you prepared to undertake work? (e.g. Poole only)

.....

Are there any areas of voluntary work, which you would definitely not be interested in?

.....

Please give details of any skills and interests you have and any previous voluntary work experience.

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.....

At what times are you available as a volunteer? Please tick the appropriate box(es).

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
AM							
PM							
EVE							

Are there any particular days when you would not be available? (e.g. school holidays, bank holidays etc). Please give details.

.....

.....

Date of birth: (optional)

Gender: Male Female (circle one)

(EO)

Which age group are you in? (tick one)

15 – 18	30 – 34	45 – 49	60 – 64
19 – 25	35 – 39	50 – 54	Over 65
26 - 29	40 - 44	55 - 59	Under 15

What is your current employment status? (tick one)

(EO)

Employed	Student
Non employed	Unable to work
Houseperson	Unemployed
Retired	

Which ethnic group do you feel you belong in? (tick one)

(EO)

White British	Indian
White British (English)	Pakistani
White British (Scottish)	Bangladeshi
White British (Welsh)	Other Asian background
White Irish	Black Caribbean
Other White background	Black African
White & Black Caribbean	Other Black background
White & Black African	Chinese
White & Asian	Any other background
Other Mixed background	

Nationality

Religion

Are you disabled?

Yes No (please circle)

(EO)

If Yes are you:

Registered

Self Classifying

Driving.

Only complete the next two questions if you want to drive as part of your voluntary work. (tick one)

Insured for voluntary driving	
Own transport available	

What licence type do you hold? (tick one)

Car Automatic	HGV – Class 2
Car Full	HGV – Class 3
Car Provisional	Motorcycle
HGV – Class 1	PSV / Coach

What means of transport would you use to undertake voluntary work? (e.g. bus, train etc).

Comments: