



Aylesbury Youth Action Volunteer Application Form

VOLUNTEERS NAME:



Young people making a difference

Dear Volunteer

Thank you for deciding to join AYA!

Character Reference

If you need to leave your Character Reference with your referee, please hand in your Volunteer Application Form without it, informing AYA that your referee will be sending your Reference on separately.

What happens next?

You will be contacted once your application has been received and considered for voluntary work within the local community. If approved you will be invited for an induction, where we will explain what happens next and what will be expected of you.

Helping us to help you

We cannot stress enough the importance that the details requested are completed fully on this form and other consent forms (see reverse for complete list), failure to do so accurately could lead to your application being unsuccessful. AYA are completely inclusive of all backgrounds and abilities, and wish to ensure your safety and enjoyment of your volunteering experience. Any information will be treated as confidential in line with the latest Data Protection regulations.

Identification

All volunteers will be required to wear an AYA T-shirt or hoody (weather dependant) to identify themselves to others, in some cases an additional ID lanyard maybe required as well. These uniform items are available to purchase for £5 or alternatively your Project Leader will have a supply which you may borrow for the duration of your project session.

Happy volunteering!



Please return this form to:
Memberships
Aylesbury Youth Action
Queens Park Arts Centre
Aylesbury
Bucks HP21 7RT

About You

Please complete this section to enable us to identify you and keep in communication with you for regular AYA updates and to match you with projects as near as possible to your geographical location.

First Name(s): Surname: Male/Female

Preferred name/nickname: Date of Birth: (You must be aged 14-24)

Address: Tel:

..... Mobile:

Postcode: Email:

1) How do you prefer to be contacted? (please tick all that apply)

- Email Mobile Post Social Media via Parent/Guardian via School

2) What is your education or employment status at this time? (Please tick any that apply)

(Knowing this information helps us place you with projects as nearby to where you live as we can, to simplify transport needs)

- Place of Education: Employed/Self Employed At school / Home schooled
 NEET - Not in Employment, In 6th Form, College or Further Education
 Education or Training In Training / Apprenticeship
 Other

3) Which ethnic group do you feel you belong to? (Please tick any that apply)

(This question is optional, and any answers are gathered are for reporting purposes to our Funders, the information will also be included in our Annual Report to show that we are an equal opportunities organisation)

- Asian British Black British Oriental British White British
 Asian Other Black Other Oriental Other White Other
 Mixed Race Prefer not to say Other

About Your Volunteering

This section is designed to enable AYA to give you the best experience through volunteering. We want you to enjoy your time with us, as well as to develop new skills and gain experience which will help you in the future.

1) Have you done any volunteering before? Yes No (If Yes, please give details)

.....

2) Which of the following areas of volunteering would interest you? (Please tick all that apply)

- Media/IT/Websites Culture/Heritage Campaigning on issues Work with children
 Art/Graphics/Design Journalism Conservation/Environmental Work with people with disabilities
 Sports Music/Dance Justice/Human Rights Work with the elderly
 Drama/Film Business Work with Young People

3) Are there any areas or skills that you need for your future career? Yes No (If Yes, please give details)

.....

4) Is there a particular project that you would like to sign up for? Yes No (If Yes, please give details)

.....

5) When would you like to volunteer? (Please tick any that apply)

	Term Time							School Holidays						
	Mon	Tues	Wed	Thu	Fri	Sat	Sun	Mon	Tues	Wed	Thu	Fri	Sat	Sun
Morning														
Afternoon														
After School														
Evening														

6) How often would you like to volunteer? (Please tick any that apply)

- Weekly/Fortnightly in term time Once a month During the school holidays Occasionally

7) **New Projects** - Do you have an idea for a new project or would you like to be involved in designing a new project?

Yes No (If yes please ask for further details)

8) **Accreditations** - Would you like your voluntary hours to contribute to any of the following schemes?

Yes No

Please ask if you would like more information or check our website for details. Please note that a payment is due for all accredited schemes.

Scouts/Guides vInspired Duke of Edinburgh Other (Please state)

9) **Marketing** - How did you hear about us?

(This is another optional question, which helps us to see whether our existing marketing strategies are successful)

Leaflet drop Friends and family / Word of mouth Website Search Social Media (ie FB/Twitter)
 Presentation at school Presentation at Youth Group Referral / Recommendation Other

Data Protection

AYA operate in line with the Data Protection regulations and this section is to safeguard both yourself and local community members, If your circumstances change during your time with AYA and therefore your consent for anything reflects, this, please inform us as soon as possible. Please note that we have separate forms for some items of consent, which will be explained to you during your induction.

DBS - Do you agree to any necessary DBS procedures being undertaken by AYA for relevant projects with vulnerable community residents?

Yes No

Property - Do you agree that anything you create during your volunteering is the property of AYA?

Yes No

Marketing - Do you consent to receive news and project information from AYA via social media, email and through the post?

Yes No

Police Record - Do you have a police record?

Yes No

(Under the Rehabilitation of Offenders Act 1974 if you have substantial access to people under 18, you must declare convictions even if they are spent. Having a criminal record will NOT automatically restrict you from volunteering.)

Evaluations - Do you consent to receive occasional evaluation forms from AYA? These are to track your development through the course of your volunteering, to ensure that we are providing the best service for you.

Yes No

Your information is protected under the Data Protection Act, will be treated as strictly confidential and will be stored on an online data management software. Anonymous statistics are gathered for monitoring purposes and reported to our funders and sponsors as part of our contractual agreement when receiving funds.

If you would like to know more about AYA's policies on Data Protection and Privacy, please do not hesitate to ask.

Declaration

I give my consent to take part in volunteering opportunities organised through Aylesbury Youth Action and confirm I am willing and able to commit my time to AYA once assigned a project.

Volunteer Signature:

Date:

Parent/Guardian Consent must be obtained if you are under 16

Parent/Guardian Signature:

Date:

Volunteer Medical Form

AYA Charity Number: 1165882

Please complete this form to ensure that you are placed with appropriate projects and are covered under relevant health and safety, insurance and data protection purposes. The details entered here should not inhibit your ability to volunteer; however AYA want to ensure that you are not placed into an unsuitable environment.



- Please note that failure to declare a medical condition could invalidate your application to volunteer -

First Name: Surname:

Date of Birth: Place of Education/Work:

1) Medical Declaration

Do you have a disability, condition or particular circumstance that may affect you which we need to be aware of?

- Yes No
- Hearing Sight Physical/Mobility Asthma Allergy
- Mental Health Speech Learning Disability Other

Please give details of your condition and how this affects you.

.....

2) Medication Declaration

Will you need to take any medication during the course of a project, which we need to be aware of?

(Please note that we cannot administer medication during a session, this information is for health and safety purposes)

- Yes No (If yes, please give details)

.....

3) Agencies Declaration

Are there any other agencies that you are part of for your personal/social development that we should know about to create a better and more holistic volunteering experience, i.e. mental health group, behavioural unit, special needs clinic, young carers etc.?

- Yes No (If yes, please give details)

.....

4) Independence Declaration

Can you arrive and leave on your own, if safe to do so; wherever the particular AYA activity takes place or at a designated meeting point?

- Yes No

5) Buddying Programme

Would you be interested in supporting another volunteer who has additional needs; for example because they have a physical or learning disability?

- Yes No

Emergency Contact Details

In a case of an emergency, whom should we contact? (eg a parent, guardian or neighbor)

Name: Relationship to you:

Telephone: Email:

Address: Name, address and phone number of doctors surgery:

.....

Postcode:

Are you allergic to any medication? Yes No (If yes, please give details)

.....

Declaration

I declare that I have answered all of the above questions truthfully and as fully as possible. Any change in health must be declared, even after submitting this form, as it may affect your volunteering.

Volunteer Signature: **Date:**

Parent/Guardian Consent must be obtained if you are under 16

Parent /Guardian Signature: **Date:**

Data Protection - Your information is protected under the Data Protection Act (2018), will be treated as strictly confidential and will be stored on an online data management software. Anonymous statistics are gathered for monitoring purposes and reported to our funders and sponsors as part of our contractual agreement when receiving funds. If you would like to know more about AYA's policies on Data Protection and Privacy, please do not hesitate to ask.

Please return this form to Aylesbury Youth Action, Queens Park Arts Centre, Aylesbury, Bucks HP21 7RT

Volunteer Photo, Film & Audio Consent Form



AYA Charity Number: 1165882

Please complete this form to ensure that we have your consent to use your photo/audio/film for printed marketing, social media, projects, and security/identity purposes.

First Name: Surname:

Date of Birth:

Please tick the following items to give your consent for photography, film and/or audio use within those areas.

AYA Marketing

We publicise AYA quite regularly through printed marketing and social media.

- 1) Do you consent to the use of your photography, film and/or audio being used for AYA publicity and marketing?
 Yes No

AYA Projects

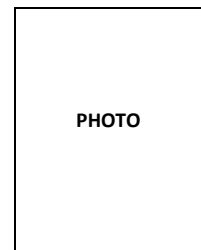
Some projects use photography, film or recorded voice during their sessions.

- 2) Do you consent to the use of photography, film and/or audio being used during the course of an AYA project?
 Yes No

AYA Identity

Some projects require our volunteers to identify themselves with an additional ID badge/lanyard.

- 3) Do you consent to your photo being used for security purposes?
 Yes No



If you have given consent for the use of your photo for identity purposes, please provide a passport sized photo and place it where indicated.

Funders Impact

Our Funders do occasionally ask for photographs of our projects to illustrate the impact we make within the community.

- 4) Do you consent to the use of photography, film and/or audio being sent outside of AYA to our Funders?
 Yes No

Community Organisations

Some community organisations also ask if we are able to share photos of our projects for their publicity and impact purposes.

- 5) Do you consent to the use of photography, film and/or audio being sent outside of AYA to other community organisations?
 Yes No

Declaration

I declare that I have given my consent as per completed above in connection with the use of my photography, film and/or audio.

Volunteer Signature: **Date:**
Parent/Guardian Consent must be obtained if you are under 16

Parent /Guardian Signature: **Date:**

Data Protection - Your information is protected under the Data Protection Act (2018), will be treated as strictly confidential and will be stored on an online data management software. Anonymous statistics are gathered for monitoring purposes and reported to our funders and sponsors as part of our contractual agreement when receiving funds. If you would like to know more about AYA's policies on Data Protection and Privacy, please do not hesitate to ask.

Volunteer Character Reference

AYA Charity Number: 1165882



Please ask a responsible adult, who is not a relative, to complete and sign this Character Reference e.g. a teacher, employer, youth worker.

- If you need to leave this form with your referee, please hand in your completed Application Form, then inform AYA that your Character Reference will be sent separately -

Dear Referee,

The following person has applied to become a volunteer at AYA. It is very important that all of our volunteers obtain a Character Reference when joining AYA. Please complete the following details as fully as you can and return to the following address:

Aylesbury Youth Action
Queens Park Arts Centre
Aylesbury
Bucks
HP21 7RT

Many thanks

The Aylesbury Youth Action Team

Name of Young Person:

Date of Birth:

Please give a brief assessment of the named individual, containing any relevant information that you would like to add about them.

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.....
.....

Declaration

To the best of my knowledge I do not know of any reason why this young person should not work on projects in the community that involve children or vulnerable adults.

Referee name:

Profession and relationship to applicant:

How long have you known the applicant:

Contact number:

Signature: Date:

Data Protection - Your information is protected under the Data Protection Act (2018), will be treated as strictly confidential and will be stored on an online data management software. Anonymous statistics are gathered for monitoring purposes and reported to our funders and sponsors as part of our contractual agreement when receiving funds. If you would like to know more about AYA's policies on Data Protection and Privacy, please do not hesitate to ask.

FOR AYA OFFICE USE ONLY:

- Character Reference*
- Medical Form*
- Volunteer Charter*
- Photo, Audio and Marketing Consent Form*

- Volunteer Development Star*
- Volunteer Development Star: Follow up*

- Clothing Request Form*
- Accreditation Request Form*



*Aylesbury Youth Action - Charity No. 1165882
Queens Park Arts Centre, Aylesbury, Bucks HP21 7RT
Office: 01296 421149
Email: volunteer@aylesburyyouthaction.co.uk
Web: www.aylesburyyouthaction.co.uk*

