**VOLUNTARY STAFF APPLICATION FOR WAGGY TAILS RESCUE**

Title ………… First name ……………………............... Surname ...........................................

**PLEASE WRITE
IN BLACK INK**

Address ……………………………………………….....................................................................

………………………………………………................Postcode ......................................

Tel. No: landline ......………………………………... Mobile ……….…………………............................

Email address ……………………………………………...................................................................................

How would you prefer us to contact you? Email / Post / Telephone

(As a volunteer we will keep you up to date with what is going on in the charity and our coming events by using the above contact details)

Date of Birth ……………....….... Nationality ..................................................

Occupation ..................................................................

Have you worked as a volunteer before? ………….

If so, for which charity? ……………………………………............................. When? ……………………........

Have you ever owned a dog, cat, other animal? ................

(Please give brief details and dates of ownership) ...............................................................................

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Do you have any experience of rescue animals? ...............

(Please give brief details) .....................................................................................................................

Do you have any physical or medical conditions that we should be aware of? ..........................................

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Do you have any criminal convictions? …………......

Please give the name, **address and telephone number** of two people who would be willing to give you a personal reference (these should not be relatives or friends) We will be contacting them for your reference before proceeding with your application.

1) Name .........................................................................................

Address .........................................................................................................................................

Tel.No. ..………………................................... Email ............................................................................

Occupation …………………………………………… Capacity …………………...................................................

2) Name .........................................................................................

Address ..........................................................................................................................................

Tel. No. ….......................................... Email ...................................................................................

Occupation .…….......................................................… Capacity ...................................................

**There are many ways in which you could help the charity.**

**Please tick to let us know which tasks you would be willing to help with:**

Helping in our shop in Turbary Road, Ferndown ............

Helping in our shop in Charminster Road, Bournemouth ..................

Helping in our shop in Parkstone ............

Helping in our office ......................

Driving ............ (you must have a clean licence)

Helping with deliveries/collection of items ............ (may involve heavy lifting)

Fostering a dog .............................................

Fostering small animals......................................... (rabbits, guinea pigs, rats etc)

Making items for sale, e.g. cakes, crafts ............

Helping at Fundraising events ............

Helping with store or street collections (2-3 hours) ............

Carrying out home checks / follow up visits ............

DIY ............

**We are unable to have vulnerable adults at Helen’s House as a condition of our insurance. This applies to the following:**

Animal welfare assistance (Over 18 yrs only) ............ Includes dog walking, cleaning, socialising and grooming. Most rescue dogs are not lead trained and may need restraint. You need some expertise, possibly strength and quick reactions. Animal welfare requires a regular commitment, either weekly or every fortnight.

How much time could you give? Hours per week ..................... Days/times available ..................................

**Please write on a separate sheet why you would like to volunteer for Waggy Tails Rescue and what skills and experience you can bring to the charity.**

We like to keep in touch with our supporters about news from Waggy Tails Rescue including fundraising activities and forthcoming events. Would you like to receive news from WTR by:

Post

Email

Phone

You can change your mind at any time by contacting us directly.

**Data Protection:**

We take looking after your personal details very seriously. We will not share your details with anyone else.

Thank you for expressing an interest in volunteering for Waggy Tails Rescue.

Signature .............................................................. Date ..........................................

Please return your form and supporting statement to:

Waggy Tails Rescue, Helen’s House, 143 Magna Road, Wimborne, Dorset BH21 3AW Tel. 01202 875000