

NEW VOLUNTEER REGISTRATION FORM



Supporting independent mobility
in Exeter

First Name:

Surname:

Home Address:

Telephone No: (Home)

(Mobile)

Email

What would you like to achieve through your voluntary work at the organisation?

What days/ how often would you like to come in?

Have you had any Criminal Convictions

YES

NO

ExeAccess will to a DBS basic check for all volunteers

Additional information (if any)

REFERENCES

Please supply the names and addresses of two referees, who know you well, e.g. previous employer, previous volunteering project, doctor or other professional etc. Please note that these cannot be a relative.

Referee 1

Name: _____

Relationship to Referee: _____

Position:

Address:

Post Code

Tel No:

Email:

Referee 2

Name: _____

Relationship to Referee: _____

Position:

Address:

Tel No:

Email:

☐

Please tick this box to consent to ExeAccess holding and processing your personal data for the purposes of becoming a Volunteer.