

Merton Libraries Culture & Creativity Volunteering Application Form

Please fill out the information in this form in **block capitals** and email to:

zoe.burden@merton.gov.uk

All information given will be treated with confidence.

Personal Details	
First Name:	Surname:
Preferred Method of Contact: Email <input type="checkbox"/> Telephone <input type="checkbox"/>	Date of Birth:
Address Line 1:	Telephone Number:
Address Line 2:	Town:
County:	Postcode:
Email Address:	
Emergency Contact Details:	
Do you consider yourself to have some form of disability or long-term illness? Yes <input type="checkbox"/> No <input type="checkbox"/>	If you answered yes, how would you describe this condition? Hearing Impairment <input type="checkbox"/> Visual Impairment <input type="checkbox"/> Learning Difficulties <input type="checkbox"/> Physical Disability <input type="checkbox"/> Speech Impairment <input type="checkbox"/> Mental Health <input type="checkbox"/>
What is your preferred volunteering site:	
Volunteering Details	
Please indicate if you would be willing to work at any of our other sites as well below	
Colliers Wood: <input type="checkbox"/>	Mitcham: <input type="checkbox"/>
Morden: <input type="checkbox"/>	Pollards Hill: <input type="checkbox"/>
Raynes Park: <input type="checkbox"/>	West Barnes: <input type="checkbox"/>
Wimbledon: <input type="checkbox"/>	

What is your preferred Volunteering Role:	
Culture & Creativity Communications <input type="checkbox"/>	Culture & Creativity Production <input type="checkbox"/>
Please tell us about any relevant experience and suitability for the role:	
How did you hear about us?	
Social Media <input type="checkbox"/>	Through library events <input type="checkbox"/>
Word of mouth <input type="checkbox"/>	Partner advertising <input type="checkbox"/>
On site (library advertising) <input type="checkbox"/>	Merton Connected <input type="checkbox"/>
Website <input type="checkbox"/>	Other (please specify) <input type="checkbox"/>
References	
Please provide the names and contact details of 1 referee below. Your referees need to be over the age of 18 and must have known you for at least 1 year . References from family members will not be accepted. Please provide the following referee details within the box below.	
<ul style="list-style-type: none"> <i>Name of referee, Their position (if business reference), Relationship to you, Address and post code, Telephone, Email address (written clearly)</i> 	
Reference contact details:	
Email (please write clearly):	

Are you eligible to work and volunteer in the United Kingdom? (Yes or No)_____

Have you ever been convicted of a criminal offence? (Yes or No) _____

For forms returned by hand please add return date here: dd/mm/yy_____

By signing below you confirm that the information provided within this application is true:

Sign here:_____ **Date**_____

Important notes:

- Volunteers will be required to provide one form of picture ID and proof of address (e.g., driving licence/passport and utility bill/official letter).
- Volunteer applicants must be aged 16yrs + and will be required to undergo a DBS check.

The below information is not essential for your application but does support equalities monitoring.

Merton Volunteer Form

LIBRARIES AND HERITAGE SERVICE

Name

STATUS

☒

Active

☐

Not active

LIBRARY

☐ Donald Hope

☐ Mitcham

☐ Morden

☐ Pollards Hill

☐ Raynes Park

☐ West Barnes

☐ Wimbledon

AGE GROUP

☐ Under 15

☐ 15 to 18

☐ 19 to 24

☐ 26 to 29

☐ 30 to 34

☐ 35 to 39

☐ 40 to 44

☐ 45 to 49

☐ 50 to 54

☐ 55 to 59

☐ 60 to 64

☐ Over 65

ETHNIC ORIGIN

☐ White British

☐ White British (Scottish)

☐ White British (Welsh)

☐ White Irish

☐ White British

☐ Other White Background

☐ Bangladeshi

☐ Indian

☐ Pakistani

☐ Other Asian Background

☐ Black African

☐ Black Caribbean

☐ Other Black Background

☐ White & Asian

☐ White & Black African

☐ White & Black Caribbean

☐ Other Mixed Background

☐ Chinese

☐ Any Other Background

EMPLOYMENT

☐ Employed

☐ Non employed

☐ Houseperson

☐ Retired

☐ Student

☐ Unable to work

☐ Unemployed

SUPPORT

☐ No disability, health or support need

☐ Physical health issues

☐ Mental health issues

☐ Learning disability

☐ Physical or sensory disability

☐ Other