

Thurrock Council

Thurrock Libraries Summer Reading Challenge 2021 Volunteer application form

We're really glad you want to volunteer with us! It would help if you could answer a few questions, just so we can make sure that you get what you want out of volunteering and so that we know how to contact you.

You can apply for this role any time up to 30 June 2021, but the volunteering starts in the summer holidays.

How we will use your information

We will use your information to provide the service requested. We may share your personal data between our services and with partner organisations, such as government bodies and the police. We will do so when it is of benefit to you, or required by law, or to prevent or detect fraud. To find out more, go to thurrock.gov.uk/privacy. Get free internet access at libraries and community hubs.

About you

| | |
|---|--|
| First name | |
| Last name | |
| Address, including postcode | |
| Home phone | |
| Mobile phone | |
| Email address | |
| We will contact you by email. Remember to check your spam or junk folder in case your email provider sends messages from us there at first. If you don't have email you could use a family member's email address, but you must ask their permission first. | |
| Age | |
| Date of birth | |

Your school

| | |
|----------------|--|
| School name | |
| School address | |

Volunteering

| | |
|--|--|
| Why you are interested in volunteering for this year's Summer Reading Challenge? | |
| Have you worked with children before? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If 'Yes', what sort of work with children? | |

In which Thurrock library would you like to volunteer? We cannot always give volunteers their first choice library, and travel expenses are not paid, so choose libraries that you can get to easily.

| | |
|-----------------------|--|
| First choice library | |
| Second choice library | |

We are asking volunteers to give 15 hours in total over the summer holidays. You could volunteer for 2 hours at a time in the morning or afternoon, but it's not every day. You can also volunteer to do more hours if you want.

| | |
|--|--|
| If you have holidays booked in the summer, please give the dates | |
|--|--|

| | |
|--|--|
| Have you worked with children before? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If 'Yes', what sort of work with children have you done? | |

| | |
|---|---|
| Will you put your volunteering hours towards any youth award schemes? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe |
| If 'Yes', which schemes? For example, Duke of Edinburgh. | |

Referees – if you are under 16 years-old

If you are under 16 years-old, we will need **1 reference** from a teacher at your school. If you are home educated, please ask someone who knows you well but is not related to you.

Remember to ask your teacher's permission before you add their name here – a form will be sent for them to complete. We will also need consent from your parents at the end of this form.

I confirm that the applicant is in full time education and is a suitable candidate to volunteer to work with children:

| | |
|-------------------------|--|
| Teacher's name | |
| Teacher's email address | |

Referees – if you are 16 years-old or older

If you are 16 years-old or older, we will need the details of **2 referees** and a Disclosure and Barring Service (DBS) form will need to be completed. We will contact the referees to ask for references before you are offered a place.

Referees cannot be members of your own family. Please include email addresses, if possible.

Referee 1

| | |
|------------------------------|--|
| Full name | |
| Position held | |
| Address, including postcode | |
| Phone number | |
| Email address | |
| How long they have known you | |

Referee 2

| | |
|------------------------------|--|
| Full name | |
| Position held | |
| Address, including postcode | |
| Phone number | |
| Email address | |
| How long they have known you | |

Emergency contact details – required for ALL volunteers

Please provide us the name and phone number of someone we can contact in an emergency if you are taken ill whilst volunteering with us:

| | |
|-------------------------|--|
| Emergency contact name | |
| Emergency contact phone | |

Medical condition details – required for ALL volunteers

| | |
|--|--|
| Please list details of any medical conditions that we should be know about – for example: epilepsy, asthma, severe allergies | |
|--|--|

Criminal conviction details – only if you are 18 years-old or older

For voluntary roles within Thurrock Council, those applying must give details of any unspent convictions. For roles that involve regular contact with children, young people and vulnerable adults, details of spent convictions and a Disclosure and Barring Service (DBS) check is needed.

The information you provide will be treated as strictly confidential and will be considered only in relation to the voluntary position for which you are applying.

| | |
|--|--|
| Have you been convicted of any criminal offence? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If 'Yes', please provide details of all previous convictions | |

Optional information

The information below is optional, but completing it will help us make sure that we are providing the same volunteer opportunity to everyone. The information that you give will be kept separate from your application form and only used for reporting purposes.

Gender:

- I am a girl
- I am a boy
- I am transgender – if you feel the body you are born into is not right for you, and you may want to change from being a woman to a man or from a man to a woman

Ethnicity:

- White – British
- White – Irish
- Any other White background:

- Mixed ethnicity – Asian and White
- Mixed ethnicity – Black African and White
- Mixed ethnicity – Black Caribbean and White
- Mixed ethnicity – Any other mixed background:

- Asian or Asian British – Bangladeshi
- Asian or Asian British – Indian
- Asian or Asian British – Pakistani
- Asian or Asian British – any other Asian background:

- Black or Black British – African
- Black or Black British – Caribbean
- Black or Black British – any other Black background:

- Chinese
- Any other ethnic group:

Disability:

- I consider myself disabled
- I do not consider myself disabled

Parental consent

If you're under 16 years-old, the signature of a parent or carer is needed to say that they're happy for you to volunteer with us.

| | |
|---------------------------|--|
| Signature | |
| Name of signatory | |
| Relationship to volunteer | |
| Date | |

Volunteer declaration for 16 years-olds and older

I confirm that the information given in this application is correct to the best of my knowledge.

I accept that if I give any false information I will not be allowed to continue to volunteer for Thurrock Council.

I note that my details will be held on a database during the Summer Reading Challenge.

| | |
|-----------|--|
| Signature | |
| Date | |

Applications must be returned by 30 June 2021.

Return this form your local Thurrock library or send to:

Rachel Gallehawk, Senior Librarian,
Grays Library, Thameside Complex, Orsett Road, Grays, RM17 5DX.

Email: volunteering@thurrock.gov.uk