



***Step To Shelter Merseyside***  
**Volunteer Application Form**

Please return completed form to: [support@steptoshelter.co.uk](mailto:support@steptoshelter.co.uk)

Personal Details	
Name	
Telephone No	
Email	
Date of Birth:	
Address:	
What Role are you applying for....?	
Experience/ Questions	
Please tell us why you are. I am interested in volunteering. with us?	
Please tell us about any relevant experience you have with working with autism.	
Do you have any health problems or a disability, we should know about?	
Do you have any relevant training?  First Aider, Food Hygiene	
Is there anything else we should know about you?	
<b>What's your unavailability?</b>	



## References

Please provide us with the details of 2 people who can provide a reference. They must be over 18 and have known you for at least two years and not be related to you

### Reference 1

Name  
Address  
Telephone  
Email

How do they know you? How long have they known you?

### Reference 2

Name  
Address  
Telephone  
Email

How do they know you? How long have they known you?

## Emergency/ next of kin Contact Details

Name:  
Telephone:  
Other Number

Relation to you?

**Data Protection & Confidentiality Policy:** Here at [Step To Shelter Merseyside](#) we take our duty to protect your personal information and confidentiality seriously. We will store your information in a safe place, we won't share your information with anyone without your consent and if we do it will only be shared with the right people! Otherwise, we won't share anything we don't have too!

volunteer signature:

Signature:

Date:

**\*Office use only\***

Manager Signature

Signature:

Date:

Assistant Manager Signature

Signature:

Date: