

Section 1 – Personal Details

Title: Mr Mrs Miss Ms Other _____

Surname: First Name:

Current Address:

Postcode:

Contact Number:

Email Address:

D.O.B: Age:

Gender: Male Female Other:

Marital Status:

Section 2 – Equal Opportunity

What is your nationality?

What is your ethnicity origin?

What is your religion or belief?

What is your sexual orientation?

Do they have a disability? Yes No

If yes, please describe:

Section 3 – Disclaimers

Do you smoke? Yes No Occasionally

Do you drink alcohol? Yes No Occasionally

Are you currently in or have been in rehab for alcoholism? Yes No

Do you use drugs? Yes No Occasionally

Are you currently in or have been in rehab for drugs? Yes No

Do you have any criminal convictions? Yes No

Please outline any convictions not considered spent under the Rehabilitation of Offenders Act

Date of Conviction	Offence	Length of Sentence

Are you on any medication? Yes No

Name of Medication	Dosage	Time Taken	Reason for Usage

Section 4 – Position You Are Applying For

Homeless Ministry	
Day Time Ministry	
Night Time Ministry	
Cooking	
Sourcing Resources	
Driving	

Housing Association	
Support Worker	
Cleaning	
Maintenance	
Administration	
Pastoral Support	

Section 5 – Why do you want to become a volunteer for Bethel Homeless Ministry?

Section 6 – What experience and skills can you offer the people we support at Bethel Homeless Ministry?

Section 7 – Declaration

To the best of my knowledge, the information within this form is true and accurate. I understand that if relevant information has not been disclosed or any information deemed false, Bethel Homeless Ministry reserves the right to discard my application form.

Full Name: _____

Signature: _____ **Date:** _____