Volunteer Registration Form

To be used by all people wishing to volunteer in NHS Lanarkshire

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<tr>
<th>PERSONAL DETAILS</th>
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<tbody>
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<td>Title:</td>
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<td>Name:</td>
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<tr>
<td>Address:</td>
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<tr>
<td>Postcode:</td>
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<tr>
<td>Tel: (Home)</td>
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<tr>
<td>Tel: (Mobile)</td>
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<tr>
<td>E-mail</td>
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<tr>
<td>Preferred contact method</td>
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What Interests do you have?

What do you feel you are good at?

Do you have any previous experience of working or volunteering in the health service? Yes/No if yes please let us know

Do you have any qualifications or experience you want to tell us about?

How did you hear about this service?

Where would you like to volunteer?
When are you available to volunteer?

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<th>Monday</th>
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Do you have a driving license?      Yes/No

Do you have access to a car?        Yes/No

**Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975:**

Because of the nature of the voluntary activity for which you are applying, this post is exempt from the provisions of section 4(2) of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Applicants are therefore NOT ENTITLED to withhold any information about convictions, which would otherwise be considered as spent. Failure to disclose such convictions could result in dismissal.

Do you have any criminal convictions? If yes, please state

**References**

Please give the names of 2 references

1. Name:
   Address:

   Email:
   Telephone:

2. Name:
   Address

   Email:
   Telephone:

NHS Lanarkshire keeps all volunteer details on a computer database. Please tick the box if you do not consent to this.

Please return to Volunteers Recruitment, Recruitment Services, NHS Lanarkshire, Law House, Airdrie Road, Carluke, ML8 5ER
Equal Opportunities Monitoring

NHS Lanarkshire is committed to providing Equal Opportunities in its employment practices. It is our policy to ensure that no applicant receives less favourable treatment on the grounds of sex, marital status, race, disability, age, responsibility for dependants, sexuality, creed, political party or trade union membership, HIV/AIDS status.

To help us achieve this, Section D must be completed by you and returned with your application form. No application will be processed without Section D. Please use the “Prefer not to Answer” option where appropriate.

Information provided will be treated with the utmost confidence and will ONLY be used to advise NHS Lanarkshire and NHS in Scotland as a whole of improvement in performance. This information will be separated on receipt of your application form and will be used by the HR Recruitment for equal opportunity monitoring purposes only.

Under no circumstances will this information be made available to Managers or panel members involved in the recruitment process.
Volunteering Registration Form

Preferred Volunteering Site

Equal Opportunities Monitoring

We want to ensure that our volunteer opportunities are open to all. The only way we can ensure there is equal opportunity is to monitor applications we receive and compare the profile of people who apply with those appointed. Therefore this form asks you for your ethnic origin, gender, disability, religion, sexuality and age. **The information you provide in this part of the form (Part D) is confidential and is not used in the selection process. It will be separated from the rest of the form when we receive it.**

1) You are:

Female ☐ Male ☐

2) Have you undergone, are you undergoing or do you intend to undergo gender reassignment? For example, this includes having changed your sex (gender)?

Yes ☐ No ☐ Prefer not to say ☐

3) What is your age?

I am _____ years old, and my date of birth is:

4) Do you have a physical or mental health condition or disability that:

   - has a substantial effect on your ability to carry out day to day activities?
   - has lasted or is expected to last 12 months or more?

   Yes ☐ No ☐ Prefer not to say ☐

   - If you answered ‘yes’ please tick if it is either of the following:

     Learning Disability ☐ Physical impairment ☐
     Long standing illness ☐ Sensory impairment ☐
     Mental health condition ☐
     Other (please describe): ☐

   - Again, if yes, please describe any particular arrangements you would need for your work location:
Volunteering Monitoring Form

<table>
<thead>
<tr>
<th>Preferred Volunteering Site</th>
<th>Candidate ID No:</th>
</tr>
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</table>

5) **What is your ethnic group?**

Choose one section from A to F, then **tick** the appropriate box to indicate your cultural background.

**A: White**
- [ ] Scottish
- [ ] Irish
- [ ] Other British
- [ ] Any other White background

**B: Mixed**
- [ ] Any mixed background

**C: Asian; Asian Scottish; Asian British**
- [ ] Pakistani
- [ ] Indian
- [ ] Chinese
- [ ] Bangladeshi
- [ ] Any other Asian background

**D: Black; Black Scottish; Black British**
- [ ] Caribbean
- [ ] African
- [ ] Any other Black background

**E: Other ethnic background**
- [ ] Any other background

**F: Prefer not to answer**
- [ ]

6) **To which religion, religious denomination or body do you actively belong?**

- [ ] (Christianity) - Church of Scotland
- [ ] Hinduism
- [ ] (Christianity) - Roman Catholic
- [ ] Sikhism
- [ ] Christianity (other)
- [ ] Judaism
- [ ] Other faith / belief
- [ ] Islam
- [ ] Buddhism
- [ ] No religion (none)
- [ ] Prefer not to answer

7) **Which of the following best describes your sexual orientation?**

- [ ] Bisexual
- [ ] Gay Man
- [ ] Heterosexual
- [ ] Lesbian/Gay Woman
- [ ] Other
- [ ] Prefer not to answer

8) **Which of the following best describes your current situation?**

- [ ] Employed
- [ ] College/Univ Student
- [ ] Unemployed
- [ ] School Pupil
- [ ] Retired
- [ ] Carer
- [ ] Other
- [ ] Prefer not to answer