

VOLUNTEER STAFF



First Name: _____

Family Name: _____

Date of Birth: _____ Age: _____

Sex: Male Female

Nationality: _____

Driving Licence: Yes No
 (Please attach a copy)

Address: _____

Telephone: _____

Email: _____



Are you a member of Scouting?
 No Yes (If yes please enter the name of your national Scout organisation below)

Where would you like to volunteer?
 (Please rank from 1 to 6, where 1 is your preferred centre)

	1	2	3	4	5	6	
Downe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Kent, South London)
Gilwell Park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Essex, North London)
Great Tower	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Lake District)
Hawkhirst	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Kielder, Northumberland)
Woodhouse Park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Bristol)
Youlbury	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(Oxford)

NB: If you would like to volunteer at Crawfordsburn, Yr Hafod, or Ferny Crofts please send email us at Volunteering.SAC@scouts.org.uk

Attach Photo Here
 (or to email)

Emergency Contact: _____

Address: _____

Telephone: _____

Please enter any relevant information below:

Dietary needs _____

Medical conditions: _____

Which role are you applying for?

When would you like to volunteer?

Fixed Term placements

March to February (12 Months)

September to August (12 Months)

September to April (8 Months)

March to October (8 Months)

May to September (5 Months)

Mid -July to September (2 Months)

Other

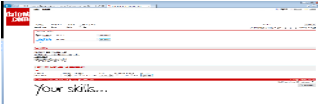
I'd like to volunteer from: _____

Until: _____

I'd like to volunteer because...

Please save this form with YOUR NAME in the title then return the application form to: Volunteering.SAC@Scouts.org.uk. If you need to post this form then please use the address found on the SAC website





In the past I have worked in...

- Administration/Marketing
- Youth Work
- Environmental/Conservation
- DIY/Maintenance
- Outdoor Education/Education
- Other _____

I have personal experience of these activities...

- Rock Climbing
- High Ropes
- Team building
- Canoeing/Kayaking
- Archery/Rifles
- First Aid
- Sailing
- Power Boats
- Orienteering
- Raft Building
- Life Saving
- Expiry Date: _____
- Other: _____

Please give details of any other relevant outdoors or volunteering experience and qualifications:

NB This might include work with youth organisations, the Duke of Edinburgh's award, membership of clubs or personal experience.



UK Scouting Applicants

Please provide the contact details for your Group Scout Leader, District Commissioner or County Scout Network Commissioner. We will contact this person to act as a reference for you.

Name: _____ Role: _____

Group/District/County: _____

Contact Email: _____

Telephone: _____

Overseas Scouting Applicants

Please provide the contact details for a representative of your National Scout Association.

Name: _____

Role/Position: _____

Name of Organisation: _____

Contact Email: _____

Telephone: _____

You may wish to ask this person to include a letter of reference on headed paper. This will help us to process your application form.

Please save this form with YOUR NAME in the title then return the application form to: Volunteering.SAC@Scouts.org.uk. If you need to fill in this form then please use the address found on the SAC website

