

Ecas Volunteer Application

All information will be treated in the strictest confidence



Established in Edinburgh in 1902

Personal Details please complete in block capitals	
Name	Daytime Tel No:
Address	Evening Tel No:
	Mobile Tel. No:
Postcode	Email Address:

Are you registered disabled ?	YES/ NO	Date of Birth	/	/
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Do you have any special needs that we need to consider when you are volunteering?

What volunteering opportunities are you interested in? You may tick more than one.

Art	<input type="checkbox"/>	Craft	<input type="checkbox"/>
Calligraphy	<input type="checkbox"/>	Swimming	<input type="checkbox"/>
Computing	<input type="checkbox"/>	Committee	<input type="checkbox"/>

If you are looking for voluntary work at specific times only, please tick when

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	Over what period would you be available? (e.g. May to July)
am	am	am	am	am	
pm	pm	pm	pm	pm	

When are you able to start?	
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What skills and /or experience could you bring to Ecas?

Do you have any special interests, skills or hobbies?

Where did you hear about Ecas?

All volunteers with Ecas are asked to give a personal reference and are subject to standard or enhanced disclosure checks. This will only be sent with your consent at the final stage of the recruitment process.

Please give the name of someone we can approach for a reference

Name:	Occupation:
Address:	In what capacity do you know this person?
Post code:	Telephone no:
Can we contact this person now? YES/NO	

To the best of my knowledge the information that I have provided on this form is correct. I understand that deliberate misrepresentation or omission of factual information may disqualify me from consideration or lead to dismissal.

Signed:

Date:

THANK YOU

Please return to:

Ecas, Norton Park, 57 Albion Road, Edinburgh, EH7 5QY

Tel 0131 475 2344 Fax 0131 475 2341

Email info@ecas-edinburgh.org Website www.ecas-edinburgh.org

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Formerly the Edinburgh Cripple Aid Society founded in 1902