



Charity shop application form

CHARITY SHOP (& BRANCH IF APPLICABLE)	
PERSONAL DETAILS	CONTAINS PERSONAL DATA
Name	
Address	
	Postcode
Tel no	Mobile no
Email	DOB (optional)
The RSPCA wholeheartedly supports the RSPCA is committed to safeguard to obtain information about their Safeguard.	o ask you the following: Are you under 18? (tick here) Are you over 85? (tick here) he principle of equal opportunities and opposes all forms of unfair discrimination. In a contract our vulnerable supporters. Please refer to your local branch or animal centre should you wish parding Policy.
	OR EXPERIENCE YOU HAVE THAT WOULD HELP YOU IN THE VOLUNTEERING ROLE SE ADD ADDITIONAL PAGES IF YOU WOULD LIKE TO).

PLEASE TELL US WHY YOU ARE INTERESTED IN VOLUNTEERING FOR THE RSPCA		
PLEASE LET US KNO	DW WHERE YOU HEARD ABOUT VOLUNTEERING FOR THE RSPCA	
HOW WE USE YOUR		
	I charity number 219099) and other RSPCA branches (separately registered, volunteer run charities) use the ed by the Data Protection Act 2018) you give us for the purpose of achieving its animal welfare objectives. This y:	
•	keeping administrative records	
•	contacting you in the future about other volunteering opportunities	
You don't have to give us your telephone number or email address, or provide information about your hobbies and interests for these purposes but if you do, we will only use them for contacting you in relation to your volunteering.		
f your application is more suited to a volunteering opportunity within another RSPCA branch, a separately registered, volunteer-run charity, we may forward your details so that branch may contact you directly about that alternative position. If you agree to your information being shared between the RSPCA and RSPCA branches in this way, please tick this box		
	nge your communication preference or find out more about how we use your personal data please contact your e consented to us sharing your data) for further details.	
VOLUNTEER DECLA	<u>RATIONS</u>	
voluntary role. If you are	UNTEER IN THE UK I confirm that I am eligible to volunteer in the UK and understand that I am applying for a non remunerated, e from outside the EU or European Economic Area we advise you refer to the UK Visas and Immigration website our eligibility to volunteer in the UK. www.gov.uk/government/organisations/uk-visas-and-immigration	
PARENTAL CONSEN Please note: opportunit under 18s.	IT (IF APPLICABLE) ies for anyone under 16 years of age are limited and some restrictions apply in relation to opportunities for	
I confirm I am the pare	ent/guardian of the person mentioned above and I consent to them volunteering with the RSPCA.	
Parent or guardian sig	gnature if <u>under 18</u> :	
Signature of parent/gu	uardian	
Name (BLOCK CAPITA	ALS)	
Contact telephone nu	mber	
	Ve will only use your telephone number for the purpose of processing this application. It will not be used for marketing purposes or hared with any third party.	
VOLUNTEER SIGNA	TURE	
result in the withdraw	rmation I have provided on this form is true and complete. I understand that any false information may all of any offer of a voluntary role. I understand that I may be asked to produce evidence of identification, the UK when applicable.	
Signature	Date	

CONFIDENTIAL - CONTAINS PERSONAL DATA

ADDITIONAL INFORMATION PAGE

This page will be held for the purpose of processing your applicatio	n and will then be destroyed securely.
REHABILITATION OF OFFENDERS ACT 1974 Have you been convicted of any offence which is not considered 'sp	pent' under the Rehabilitation of Offenders Act 1974?
□ No □ Yes	
If you have ticked yes we will ask you to complete a declaration form which preclude you from volunteering with the RSPCA.	ch we will send to you separately. This will not necessarily
REFERES Please supply details of two people we can contact for a confidential refereferee such as a current or previous employer or a school teacher.	rence. If possible, one of these should be a professional
Please ensure that you have asked your referees' permission to provide	their contact details and for us to contact them.
, , ,	their contact details and for us to contact them. Name
Please ensure that you have asked your referees' permission to provide	Name
Please ensure that you have asked your referees' permission to provide to Name	Name
Please ensure that you have asked your referees' permission to provide to Name	Name
Please ensure that you have asked your referees' permission to provide to Name	Name
Please ensure that you have asked your referees' permission to provide to the second s	Name

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS FORM.

Relationship of referee to you _____ Relationship of referee to you _____

USE THIS PAGE TO RECORD RECRUITMENT PROGRESS AND AS A CHECKLIST TO ENSURE ALL STEPS HAVE BEEN COMPLETED.

PRE-SELECTION CHECKS
Is a suitable role available?
☐ If the applicant is under 18, check parent/guardian consent provided.
☐ If criminal convictions declared, contact volunteering support team (Society establishments) or your BSS (branches
INTERVIEW
Do you wish to interview?
Date of first contact/invite to interview
Date of interview/group induction
Name of interviewer
Was the applicant successful?
Start date
Induction date
☐ Trial period agreed
References requested
NEW VOLUNTEER CHECK-LIST
Reference 1 returned.
Reference 2 returned.
Online H&S training completed.
☐ Medical form completed.
Driver declaration and checks completed (if applicable).
Code of conduct/volunteer agreement signed.
☐ Induction pack (copies of policies) provided.

HELP AND SUPPORT REGARDING THE RECRUITMENT PROCESS AND INDUCTIONS CAN BE FOUND ON THE LINK.