

CONFIDENTIAL

Return this form to:
HR Department
St. Andrew's Hospice
Peaks Lane
Grimsby DN32 9RP

**APPLICATION FOR RETAIL
VOLUNTARY ROLE**



CONTACT DETAILS:

<u>Title:</u>	<u>First Name:</u>	<u>Preferred Name:</u>	<u>Surname:</u>
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Address: Post Code: Tel. No: Mobile Tel No.	Next of Kin / Emergency Contact Details Address: Post Code: Tel. No: (Relationship)
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Email address:

Date of Birth (This is required for insurance purposes)

Have you a current driving licence? YES/NO	Car available YES/NO
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SKILLS AND PREVIOUS EXPERIENCE:

Have you any previous or present connection with the Hospice?

Please tell us about any applicable previous employment or voluntary work

Please tell us why you would like to volunteer the skills/experience you possess to support your role within the Retail Operations Team at the Hospice.

REGULAR AVAILABILITY:

Monday	AM		PM	
Tuesday	AM		PM	
Wednesday	AM		PM	
Thursday	AM		PM	
Friday	AM		PM	
Saturday	AM		PM	
Sunday	AM		PM	

Please add additional information:*(e.g. if you wish to volunteer during holidays / fortnightly etc.)***RETAIL LOCATIONS:****Please tell retail area you are interested in volunteering in.****RETAIL OUTLETS**

Grimsby - Bradley Crossroads	<input type="checkbox"/>
Grimsby - Cromwell Road	<input type="checkbox"/>
Grimsby - Cromwell Road (Children)	<input type="checkbox"/>
Grimsby – Donation Centre	<input type="checkbox"/>
Grimsby - Freeman Street	<input type="checkbox"/>
Grimsby - Scartho Road	<input type="checkbox"/>
Grimsby - West St. Mary's Gate	<input type="checkbox"/>
Cleethorpes – St. Peters Avenue	<input type="checkbox"/>
Cleethorpes – Grimsby Road	<input type="checkbox"/>

TEA BARS

Magistrates Court - Hull	<input type="checkbox"/>
Pilgrim Primary Care - Immingham	<input type="checkbox"/>

EBAY & ONLINE TRADING

Listings, Admin & Online	<input type="checkbox"/>
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RETAIL OUTLETS

Immingham – Pelham Road	<input type="checkbox"/>
Barton Upon Humber – Market Place	<input type="checkbox"/>
Gainsborough – Silver Street	<input type="checkbox"/>
Hull – Newland Avenue	<input type="checkbox"/>
Hull – Princes Quay	<input type="checkbox"/>
Louth – Queens Street	<input type="checkbox"/>
Market Rasen – Market Place	<input type="checkbox"/>
Sleaford – Southgate	<input type="checkbox"/>
Sutton on Sea – High Street	<input type="checkbox"/>

RETAIL COLLECTIONS

Retail Collections Driver*	<input type="checkbox"/>
Retail Collections Support*	<input type="checkbox"/>

*Please note Retail Collection Volunteers must complete a DBS application and provide correct documentation prior to undertaking any roles for the Hospice.

EMPLOYMENT OF RELATIVE:

St Andrew's Hospice is committed to being an equal opportunities employer and recruiting the best person for the job and therefore welcomes applications from employee's relatives and partners however to ensure our recruitment procedures are transparent and avoid favoritism please state below any relationship you may have to an employee or volunteer.

PERSONAL DECLARATION: (Please read this carefully before signing this application)

I confirm that the above information is complete and correct and that any untrue or misleading information will give the Hospice the right to reject my application or to withdraw any voluntary post offered.

I also understand that anything I hear or learn, concerning individual patients or St Andrew's Hospice business in the course of my duty as a Volunteer, must be treated in the strictest confidence.

Signed.....Date.....

DATA PROTECTION (GDPR) STATEMENT:

St. Andrews Hospice, Grimsby will process and be in control of the data provided on this form.

The information which you provide in this form and any other information obtained or provided during the course of your volunteering with us ("the information") will be used for the purpose of assessing your suitability for roles, in emergency situations e.g. to protect life or in a medical situation, and in relation to legitimate interests of our business.

You have the right to data portability, request access to, rectification or erasure of your data collected as part of this process.

If your application is successful, the information will form part of your volunteer file and we will be entitled to process it for all purposes in connection with your voluntary role.

Following the completion of your voluntary role, 'basic details' (name, address and contact details) will be retained for a further 12 months in line with Care Quality Commission and ICO guidelines, after which time will be destroyed.

Therefore:

So that we may use the information for the above purposes and on the above terms, we are required to obtain your explicit consent. Accordingly, please sign the consent section below. You have the right to withdraw your consent at any time and the right to lodge a complaint with the Information Commissioner (ICO)

I CONSENT TO MY PERSONAL INFORMATION BEING USED FOR THE PURPOSES AND ON THE TERMS SET OUT ABOVE.

Signed.....Date.....