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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | ***Volunteering***  ***Expression of Interest*** | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **FORENAME(S)****:** | | | |  | | | | | | | | | | | |
| SURNAME: | | | |  | | | | **PRONOUNS:** | | | | |  | | |
| ADDRESS,  INCLUDING  POSTCODE: | | | |  | | | | HOME TELEPHONE: | | | | |  | | |
| **MOBILE TELEPHONE** | | | | |  | | |
| E-MAIL ADDRESS: | | | | |  | | |
| Employment History | | | | | | | | | | | | | | | |
| PRESENT OR MOST RECENT EMPLOYMENT, VOLUNTEER ROLE OR EDUCATION | | | | | | | | | | | | | | | |
| Name & address of employer/school/college: | | | | |  | | | | | | | | | | |
| Summary of what you did:  Please give an outline of your employment or volunteer role: what did you do in this role, how long have you been doing it for and why did you leave (if applicable)  If you are at school or college, what subjects are you studying, are you working towards a qualification, etc. | | | | |  | | | | | | | | | | |
| **Please use this space, if appropriate, to let us know about any disabilities or additional needs you may have. Anything you tell us will be kept in confidence, and it will not stop us from offering you a place with us. We appreciate knowing this information so we can provide you with the best support that we can, so you get the best possible experience when volunteering with us.** | | | | | | | | | | | | | | | |
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| Please tick all of the roles or areas of work you would be interested in  (We cannot guarantee a position will be available, but this helps give us an idea of what you are interested in.) | | | | | Visitor Services Volunteer | | | |  | | | Social media and marketing | | |  |
| Digitisation Volunteer | | | |  | | | Collections and research | | |  |
| Working with schools and families | | | |  | | | General museum work experience | | |  |
| Please let us know why you would like to volunteer with us.  For example:  Are you looking to develop skills to help you get a paid job? If so, what kind of skills?  Are you looking for a way to support a local charity in your free time? | | | | |  | | | | | | | | | | |
| Please list any hobbies, previous experience or special skills you feel may be relevant to volunteering with us: | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| Please let us know which days you would be available for volunteering at the Museum:  (We cannot guarantee we have availability on these dates, but it helps gives us an idea of what we can offer you) | | | | | | | | | | | | | | | |
| Tuesday | | | Wednesday | | | Thursday | | | | | Friday | | | Saturday | |
|  | | |  | | |  | | | | |  | | |  | |
|  | | | | | | | |  | | | | | | | |
| Please let us know which days you would be available for volunteering remotely (at home):  (We cannot guarantee we have any projects that can be worked on remotely, but this gives us an idea of what you are looking for so we can bear you in mind if anything comes up.) | | | | | | | | | | | | | | | |
| Tuesday | | | Wednesday | | | Thursday | | | | | Friday | | | Saturday | |
|  | | |  | | |  | | | | |  | | |  | |
| **Give details of two people who would be happy to provide you with a reference.**  This could be someone you have worked for or with, in a paid job or someone you have volunteered with.  It could be a teacher, tutor, or mentor. It can be a friend or neighbour.  Please do not put anyone who is part of your immediate family. | | | | | | | | | | | | | | | |
| **1st Referee:** | | | | | | | | **2nd Referee:** | | | | | | | |
| **Name:** | |  | | | | | | **Name:** | | | |  | | | |
| **Position:** | |  | | | | | | **Position:** | | | |  | | | |
| **Address:** | |  | | | | | | **Address:** | | | |  | | | |
| **E-mail address:** | |  | | | | | | **E-mail address:** | | | |  | | | |
| **Tel:** | |  | | | | | | **Tel:** | | | |  | | | |
| How does the person above know you? | | | | | | | | How does the person above know you? | | | | | | | |
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| The Museum of Richmond aims to promote equality of opportunity for all with the right mix of talent, skills and potential. Criminal records will be taken into account for volunteering purposes only when the conviction is relevant. Having an ‘unspent’ conviction will not necessarily bar you from volunteering. This will depend on the circumstances and background to your offence(s).  Please tick as appropriate:  I **HAVE NOT** been subject to any disciplinary action by my employer or professional body  I **HAVE** been subject to any disciplinary action by my employer or professional body  I **DO NOT** have any criminal convictions held against me  I **DO** have criminal offences or prosecutions pending against me  If you do have criminal offences held against you, you will be required to provide written details of any convictions, cautions, bind-overs or prosecutions pending should you be selected for interview. Please bring these with you to your interview. | | | | | | | | | | | | | | | |
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| **THE SMALL PRINT…**  The Museum processes data relating to applicants for volunteering purposes to assist in the recruitment process. This includes facilitation of safer recruitment as part of our safeguarding obligations towards young people. The data the Museum collects and the basis for using the data is set out in the Museum of Richmond’s Privacy Notice on the Museum website. The Museum will obtain your consent to hold, process and share your personal data in relation to the recruitment process. | | | | | | | | | | | | | | | |
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| I understand that the data I supply on this form will be processed in accordance with the Museum of Richmond’s Privacy Notice and in accordance with the Data Protection Act 1998. The information supplied by me will be subject to verification and the Museum may contact people and /or organisations to confirm some of the facts contained in my application, e.g. referees, previous employers etc.  I hereby give consent for the Museum of Richmond to process and retain on file information contained on this form and in accompanying documents for a period of twelve months (or transferred to my personnel file in the event that my application is successful).  By signing my consent I authorise the Museum of Richmond to verify any information that I have given with third parties, including referees, and I authorise them to disclose my personal information to you. | | | | | | | | | | | | | | | |
| **Signed:** |  | | | | | | **Date:** | | |  | | | | | |
| I declare that, to the best of my knowledge, the information in this application is true and correct. | | | | | | | | | | | | | | | |
| **Signed:** |  | | | | | | **Date:** | | |  | | | | | |
| Please return the completed form to:  By post: Museum of Richmond, Second Floor, Old Town Hall, Whittaker Avenue, TW9 1TP  Or by email: [info@museumofrichmond.com](mailto:info@museumofrichmond.com)  **Thank you – we will be in touch soon.** | | | | | | | | | | | | | | | |