## paperweight

## **Volunteer Application Form**

Don't get overwhelmed, get help.

Personal details	
Title Mr Mrs Ms	
First NameS	urname
Address	Postcode
Home PhoneM	1obile
EmailM	farital status
Synagogue membership if any	
Date of BirthWhere you heard about us	
Please be aware that The Paperweight Trust will retain the information that you have given us on your application form. This is necessary so that we are able to match you with appropriate Clients. All such information is retained confidentially and in line with Data Protection. If you have any concerns, please refer to our Privacy Policy on our website.	
Work details	
Please complete if relevant, particularly if professional	
Business NameC	occupation
Address	Postcode
Phone	
References  e.g. community leader, professional, employer, Rabbi (both references should not be from the same office)	
Name	Name
Phone/Mobile	Phone/Mobile
Email	Email
How known	How known
Volunteering experience	
Though not a pre-requisite, briefly outline previous/current Volunteer roles, if any:	
DBS (Disclosure and Barring Service)	
All Caseworkers are required to undergo a DBS check. Our office will advise you accordingly.	
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Signature	Date