

## Volunteer Application Form

### 1 Personal Details

Surname \* \_\_\_\_\_ Title (Dr., Mr., Ms., etc.) \_\_\_\_\_

Forenames \* \_\_\_\_\_

Home address \* \_\_\_\_\_

Postcode \* \_\_\_\_\_

Home telephone \* \_\_\_\_\_ Mobile number \_\_\_\_\_

Date of birth (If under 18 ) \_\_\_\_\_ Email address† \_\_\_\_\_

*Please provide your date of birth IF you are under 18 years of age.*

*This is to safeguard your wellbeing. It will prompt us to provide the under 18 application form to obtain your parental consent.*

*† As a Minster Volunteer, you will receive the Minster Bulletin so that you are fully informed in order to carry out your role effectively.*

*As the Bulletin is distributed electronically, please provide your email address in the above space.*

How did you learn about volunteering for the Chapter of York?  
\_\_\_\_\_

Please give details of days when you would be able to carry out volunteer duties  
\_\_\_\_\_

The Chapter of York makes every effort to ensure that disabled people can compete on equal terms. If you feel this applies to you, please tick the box and enclose details on a separate sheet.

### 2 Education, Work or Voluntary Experience

Please give details of any education, training, work or voluntary experience, which you may feel is relevant to the voluntary position you are interested in.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 3 Further information

Please use this space to provide a brief statement as to why you want to be a volunteer at York Minster. \*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

† If you have provided an email address it will be used to send you the Volunteers News Sheet. This is not a marketing publication. It provides details of closures and any events which may have an impact on your volunteering duties.

\*Mandatory Field

#### 4 Please indicate the areas of volunteering you are interested in

Tick one box for an area you are interested in and two for an area you have experience in

- |  |   |
|--|---|
| <input type="checkbox"/> <input type="checkbox"/> Minster Guide                                  | <input type="checkbox"/> <input type="checkbox"/> Service and Concert Steward |
| <input type="checkbox"/> <input type="checkbox"/> Undercroft Volunteer                           | <input type="checkbox"/> <input type="checkbox"/> Server                      |
| <input type="checkbox"/> <input type="checkbox"/> Broderer                                       | <input type="checkbox"/> <input type="checkbox"/> Honorary Chaplain           |
| <input type="checkbox"/> <input type="checkbox"/> Bell Ringer                                    | <input type="checkbox"/> <input type="checkbox"/> Old Palace Shelving         |
| <input type="checkbox"/> <input type="checkbox"/> Old Palace Reception                           | <input type="checkbox"/> <input type="checkbox"/> Informal Learning Volunteer |
| <input type="checkbox"/> <input type="checkbox"/> Flower Arranger                                | <input type="checkbox"/> <input type="checkbox"/> Student placement           |
| <input type="checkbox"/> <input type="checkbox"/> Archives Volunteer                             | <input type="checkbox"/> <input type="checkbox"/> Broderer                    |
| <input type="checkbox"/> <input type="checkbox"/> Minster Mice Volunteer                         |   |
| <input type="checkbox"/> <input type="checkbox"/> Children and Young Peoples' Ministry Volunteer |   |

#### 5 Referees \*

Please give details of two referees, one of whom should be a recent employer or professional person or body. These should not be a member of your family, or a member of staff or volunteer at the Minster.

Name _____	Name _____
Position _____	Position _____
Address _____	Address _____
_____	_____
Postcode _____	Postcode _____
_____	_____
Email address _____	Email address _____
Telephone _____	Telephone _____

#### 6 Declaration \*

Please read the declaration carefully before signing and dating the form. I declare that the information I have given is true to the best of my knowledge and understand that I will be asked to leave any voluntary position offered if any information is subsequently found to be deliberately misleading.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please ensure you have completed all sections and return this form in an envelope marked private and confidential to:  
**Volunteering at York Minster, 10-14 Church House, Ogleforth, York, YO1 7JN**

\* Mandatory Field