**Thank you for considering Birmingham and Solihull Women's Aid as an organisation to volunteer your time to. Volunteers are a valued and integral part of our organisation, forming the very foundation on which BSWA was established. Since our inception, volunteers have played a vital role in contributing immeasurable value to our organisation, shaping who we are today.**

**Before applying to become a volunteer with us, please consider the following:**

|  |  |
| --- | --- |
|  | I understand that due to the nature of our work, BSWA exclusively accept applications from women.  *(These posts are covered by a Genuine Occupational Requirement (Schedule 9; Equality Act 2010 and women only need apply).* |
|  | I am able to provide BSWA with two references as part of my application.  *If you encounter challenges in securing two non-relative references, please reach out to our Store Manager, Demi Marshall, at Demi.Marshall@bswaid.org to explore alternative options.* |
|  | I understand that BSWA supports women from a pro-choice stance.  *This means that we recognise the importance of supporting women to access all available options should they not wish to continue a pregnancy, including terminations.* |
|  | I understand BSWA will reimburse expenses to attend required training up to the cost of £4.60 (with the exception of reimbursing pre-paid monthly travel cards). |
|  | I understand that in order to BSWA to manage security of information and confidentiality I will not be accepted on the volunteer programme if I am currently under BSWA support or have been within the last 6-months.  *If you have been supported by BSWA within the last 6-months you can apply at a later date or request the Volunteer Coordinator keep your application on file.* |
|  | I am over 16 years of age. |
|  | I can commit to a minimum of FOUR hours a week after completion of training. |

CHARITY SHOP

VOLUNTEER APPLICATION

All applications are strictly treated as private and confidential.

Please ensure you complete **all sections** on the form.

If completing non-electronic version, please ensure writing is clear and legible.

**This form is also available in large print.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Personal Details** | | | | |
| First name(s): | | Last name: | | |
| Address: | | | | |
| Contact Telephone no: | | Mobile Telephone no: | | |
| Email address:    Please indicate if you are happy to receive correspondence via your email address e.g. invite to training letter:                           **YES   NO** | | | | |
|  | | | | |
|  | | | | |
| Have you ever been convicted of a criminal offence?  If yes, you may be asked to supply details | | | **YES** | **NO** |
|  | | |  |  |
| 1. **Arrangements for training & interview** | | | | |
| Please state any special requirements you may have in attending an open day/weekly training and/or interview relating to disability or access needs: | | | | |
| 1. **How did you hear about us and you are you interested in volunteering for BSWA? (max 200 words)** | | | | |
| 1. **You do NOT need any qualifications or direct experience of working with women & children that have experience Domestic Abuse, we will consider all applications based on your engagement with our values and training.**   **Please tell us about any relevant skills, training or experience you have through work or volunteering that would be useful in this role.** | | | | |
|  | | | | |
| 1. **BSWA works from feminist principles, why do you think this is important? (max 200 words)** | | | | |
| 1. **What does Diversity, Equality and Inclusion mean to you? (max 200 words)** | | | | |
| 1. **Is there anything else you feel is relevant that you would like us to know? (max 200 words)** | | | | |

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| --- | --- |
| 1. **REFERENCES** - Please provide the names and addresses of two referees. It would be preferable if one was from your current or a recent paid or voluntary employer, support worker, landlord, tutor. | |
| Name:    Address:        Email Address:  Telephone Number:  Relationship to you: | Name:    Address:        Email Address:  Telephone Number:  Relationship to you: |

|  |
| --- |
| **Declaration** |
| The above information is complete and correct. I understand that statistical information contained on this form and on any application made by me to BSWA may be used for planning purposes in accordance with data protection legislation. Personal information shall be treated in strict confidence and only those authorised will have access to it. Information will not be disclosed to any external agency by BSWA without my consent except where there is a legal requirement to do so. |

|  |  |
| --- | --- |
| Signed: | Date: |

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| --- |
| Please return this form with your training confirmation slip to:  Volunteer Coordinator  Birmingham & Solihull Women’s Aid  Ryland House  44-48 Bristol Street  Birmingham  B5 7AA  or email: **volunteering@bswaid.org**  ***Please note: Application forms not signed or fully completed may be refused*** |

Training Confirmation Slip

We aim to provide training for our volunteers twice a year. While successful charity store volunteers may start volunteering before the scheduled training dates, we request that all volunteers attend two training sessions, covering topics: Introduction to Domestic Abuse and Equal Opportunities. Your participation ensures a comprehensive understanding of our values and practices.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ confirm I will attend the next available BSWA Volunteer Induction training sessions.