



**Angel Community Canal Boat Trust**

**16 – 34 Graham Street**

**London N1 8JX**

**Tel: 0207 490 5125**

**[www.angelboat.org](http://www.angelboat.org)**

**Info@acct.org.uk**

**Volunteer Application Form**

<b>Your Details:-</b>	
<b>Name:-</b>	<b>Preferred Title:- Mr/Mrs/Miss/Ms/Other</b>
<b>Address:-</b>	<b>Tel. No:-</b>
	<b>Mobile Tel. No:-</b>
<b>E-Mail:-</b>	
<b>Emergency Contact Details:-</b>	
<b>Name:-</b>	<b>Preferred Title:- Mr/Mrs/Miss/Ms/Other</b>
<b>Address:-</b>	<b>Tel. No:-</b>
	<b>Mobile Tel. No:-</b>
<b>E-Mail:-</b>	
<b>Where did you hear about volunteering for the Angel Community Canal Boat Trust?</b>	
<b>Your skills and interests (please tick)</b>	<b>Projects which may interest you (Please see our web site (<a href="http://www.angelboat.org">www.angelboat.org</a>))</b>
Admin /Clerical	Admin / Clerical
Computer Skills	Web site development
Fundraising	Fundraising
DIY	Helping to Maintain our boat
Publicity	Publicity
	Relief Crew

**Other Relevant Skills – Please Specify:-**

**Experience as a Volunteer**

**Work Experience**

**Courses or Training (if relevant)**

**Hobbies and Interests.**

**Why would you like to be a volunteer with the Angel Community Canal Boat Trust?**

**Have you ever been convicted at a Court or Cautioned by the Police for any offence? (Other than minor driving offences).**

**Yes / No (Delete as appropriate).**

**If Yes, please give details, including date(s) and nature of offence(s).**

**Are you or have you been the subject of any investigation or enquiry into abuse or other inappropriate behavior?**

**Yes / No (Delete as appropriate).**

**Have you ever been interviewed in connection with an investigation or enquiry into abuse or other inappropriate behavior?**

**Yes / No (Delete as appropriate).**

<p><b>Approximately how much time would you like to give each week?</b></p> <p><b>Please indicate particular days or times</b></p>
--

**Please give two independent referees who would be willing to supply a character reference (these must not be family members)**

<b>Name:-</b>	<b>Name:-</b>
<b>Address:-</b>	<b>Address:-</b>
<b>Tel. no:-</b>	<b>Tel. no:-</b>

**Conditions of acceptance for a voluntary position:-**

- 1 As you are applying for a post where you will be required to have contact with children, young persons or vulnerable adults you will be required to have an enhanced DBS check.
- 2 Although relevant Health and Safety, water safety, boat and canal lock operation training will be undertaken, you must acknowledge your own limitations and decline any duties or responsibilities for which you do not have the necessary skills, experience or training.
- 3 You must take every reasonable care for the health and safety of yourself and of others according to the guidelines provided by the skipper. You must not intentionally or recklessly interfere with, or misuse, anything provided in the interests of health and safety or welfare.

**I declare the above information is correct**

**Full Name:-** .....

**Signature:-** .....

**Date:-** .....

**Any information given on this form is confidential and covered by the Data Protection Act 1998**