

**Volunteering in school | Expression of interest form**

**Thank you for your interest in volunteering at Damers First School. This form is the first step to becoming a formal volunteer. Before you become a volunteer in school we need to find out a little bit more about your skills and experience to make sure we can match you with the best opportunities available. Please fill in this form with as much detail as possible. If you have any problems please contact the Volunteer Coordinator, Mrs Hillier, at chillier**[**@damers.dorset.sch.uk**](mailto:sscott@damers.dorset.sch.uk) **or on 01305 264924.**

**The school is committed to safeguarding and promoting the welfare of children and expects all staff and volunteers to share this commitment. The post may be subject to an enhanced disclosure and barring service check in line with safer recruitment guidelines.**

**Please return your signed and completed form to the school office and we will be in touch with you shortly.**

| **First name:** | **Surname:** |
| --- | --- |
| **Home phone:** | **Mobile phone:** |
| **Address:** | **Email address:** |
| **Please tell us why you would like to volunteer at Damers First School.** | |
|  | |
| **Please tell us about any relevant knowledge, skills and experience that you would bring to the role.** | |
|  | |

**Please indicate when you are available to volunteer by ticking the boxes**

***(please note these are for indicative purposes only and these will be discussed in more detail after your form submission).***

|  | Monday | Tuesday | Wednesday | Thursday | Friday |
| --- | --- | --- | --- | --- | --- |
| Morning |  |  |  |  |  |
| Afternoon |  |  |  |  |  |

**Please provide a summary of your employment history:**

| Employment History (most recent first). Please include full details of any full-time, part-time and voluntary employment with end dates and brief explanations of any periods not in employment: | | | | |
| --- | --- | --- | --- | --- |
| Post Held | Name and Address of Employer | Service Dates (month and year) | | Was this a salaried role or a voluntary role? |
| From | To |
|  |  |  |  |  |

| **Do you consider yourself to have a disability or any medical condition that may affect your volunteering? If yes please specify.** |
| --- |

| **Do you have any criminal convictions? If yes, please specify (a conviction will not necessarily exclude you from volunteering but it will be taken into account when assessing your suitability):** |
| --- |

| **To become a volunteer at Damers First School we require two references. Please provide details of two referees who we can contact to support your application. At least one of these referees should know you in a professional capacity (i.e. not be a family member or close friend).** |
| --- |
| **Referee One**  **Referee name:**  **Referee address:**  **Referee email address:** |
| **Referee Two**  **Referee name:**  **Referee address:**  **Referee email address:** |

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