



# INDIAN RED CROSS SOCIETY

## VADODARA DISTRICT BRANCH

### Volunteer Application Form

#### General Information

Surname:		First Name:	
Title:	Gender: M <input type="checkbox"/> F <input type="checkbox"/>	Middle Name:	
Address:		Date of Birth (DD/MM/YYYY):	
City:	State:	Postal Code:	
Home Phone:	Cell Phone:	Work Phone:	
E-mail Address:			
Preferred contact method:			
Do you have a valid driver's licence? Yes <input type="checkbox"/> No <input type="checkbox"/>		Licence class:	Licence number:
Have you ever been convicted of an offence under Criminal or adult law? Yes <input type="checkbox"/> No <input type="checkbox"/>			

#### Area(s) of Interest

Please rank your preferences of which type of volunteering you would like to perform (1<sup>st</sup> choice, 2<sup>nd</sup> choice etc.)

*Note that not all positions are available at all times and in all areas.*

<input type="checkbox"/>	Direct Service to Clients	<input type="checkbox"/>	Clerical/Administration	<input type="checkbox"/>	Training/Facilitation
<input type="checkbox"/>	Fundraising	<input type="checkbox"/>	Projects/Research	<input type="checkbox"/>	Special Events
<input type="checkbox"/>	First Aid Services	<input type="checkbox"/>	Presentations/Public Speaking	<input type="checkbox"/>	Disaster Management
<input type="checkbox"/>	Other (Please Specify):				

#### Previous Experience

Have you previously <u>volunteered</u> with the Indian Red Cross? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you previously <u>worked</u> with the Indian Red Cross? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Formal Qualification:	
Other training/Certification: (e.g. First Aid, Advanced Driving, Public Speaking...):	
Computer Skills: (e.g. Word, Excel, PowerPoint etc.):	

#### Commitment

<input type="checkbox"/>	Less than 6 months	<input type="checkbox"/>	6 months to 1 year	<input type="checkbox"/>	Ongoing
<input type="checkbox"/>	Other (Please Explain):				

**How did you hear about the volunteer program at the Indian Red Cross? (Check all that apply)**

<input type="checkbox"/>	Display	<input type="checkbox"/>	Called/Dropped in	<input type="checkbox"/>	Volunteer Centre	<input type="checkbox"/>	Newspaper
<input type="checkbox"/>	Poster/Flyer	<input type="checkbox"/>	Red Cross Staff	<input type="checkbox"/>	School	<input type="checkbox"/>	Television
<input type="checkbox"/>	Public Event	<input type="checkbox"/>	Friend/Relative	<input type="checkbox"/>	Internet	<input type="checkbox"/>	Radio
<input type="checkbox"/>	Local Branch	<input type="checkbox"/>	Another Volunteer	<input type="checkbox"/>	Other (Please Specify):		

**Languages** (Please circle whether *basic (B)*, *medium (M)* or *fluent (F)* for both spoken and written)

1.	Spoken: B M F	Written: B M F
2.	Spoken: B M F	Written: B M F
3.	Spoken: B M F	Written: B M F
4.	Spoken: B M F	Written: B M F

**Reference**

Please provide the contact details of two people who are not family members and who are willing to reference for your chosen voluntary work position.

**Reference 1**

Name: Relationship: How long have you Known:  
 Phone: Mobile: Email:

**Reference 2**

Name: Relationship: How long have you Known:  
 Phone: Mobile: Email:

**Declaration**

Please read each statement and any accompanying information on the "Volunteer application". Please tick each checkbox to acknowledge your acceptance of each point (below)

I am applying for volunteer work with Indian Red Cross.

I agree to uphold and work within the seven Fundamental Principles of Red Cross whilst carrying out my volunteer duties and when representing Red Cross.

I agree to maintain the highest standards of confidentiality with respect to any information obtained during the course of my volunteer work.

I have read and understood Indian Red Cross Code of Conduct Summary and agree to abide by the behaviors as set out therein.

I declare that the information contained in this application is true and correct.

I understand that I may be required to participate in an interview and selection process, undertake a reference and background check,

I understand that I will be required to undertake induction and/or service/program training prior to my commencement.

Signature:

Date:

**\*Applicants under the age of minor must have a parent/guardian fill out the following:**

I am aware of and support my child/legal dependant's decision to volunteer with the Indian Red Cross.

Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date (DD/MM/YYYY)

By checking this box I **certify that** the information in this form is correct and complete. I give my permission to the Indian Red Cross to obtain, if required, a criminal record check. I **understand that** I will be advised in advance if a criminal record check and/or a driver's abstract or other program specific checks may be required.

\_\_\_\_\_  
Applicant's Signature\*

\_\_\_\_\_  
Date (DD/MM/YYYY)