|  |
| --- |
| **Engagement Volunteers Application Form** |
| **Forename:**  | **Surname**: |
| **Permanent** **Address**: **Postcode**:  | **Email address:** |
| **Contact number:** |
| **Date of Birth:** |
| **Emergency Contact 1 (name and relation):** | **Emergency contact 1 number/s:** |
| **Emergency Contact 2 (name and relation):** | **Emergency contact 2 number/s:** |
| **What day/s are you applying for?** (days available are Friday / Saturday / Sunday)  |
| **What time would suit you best ? Please circle which one you would prefer:****11am – 2pm 2pm – 5pm** |
| **Are you able to commit to one day a week for the duration of placement?** (Please let us know if you have any prebooked holidays below) **[ ]  Yes [ ]  No** |
| **Do you have any additional learning requirements and is there any additional support you may need on placement. If you have answered yes please give further details below** **[ ]  Yes [ ]  No****Please state:**  |
| **Do you have any medical conditions, and are you on any form of medication that we need to know about? [ ]  Yes [ ]  No** **Please State:** |
| **Have you had your tetanus jab? (not required, just for information).** **[ ]  Yes [ ] No** |
| **Have you ever been convicted of a criminal and/or Animal Welfare offence? [ ]  Yes [ ]  No****If yes, please give details below:** |
| **Relevant Experience and related skills:** |
| **Interests and Hobbies** |
| **Please tell us why you would like to become an Engagement Volunteer at Noah’s Ark Zoo Farm:** |

|  |
| --- |
| **Are you or have you ever been a member of (or had any close associations with) a zoo, rescue centre, animal rights or welfare group, charity, community, or church organisation? [ ] Yes [ ]  No****If so, please state which one/s:** **When and how long were you a member?** |
| **Any further comments:** |
| **Referee Declaration:** Please provide the details of two professional person(s) that have known you for over 2 years (school/college or colleague). |
| **Name of Referee:** |
| **Email Address:** |
| **Telephone Number:** |
| **Name of Referee:** |
| **Email Address:** |
| **Telephone Number:** |
| **Applicants Declaration:****I declare that the information included in this application form is correct.****Signed: Date:** |