

**Volunteer Application Form**

If you would like to apply to join our volunteering team, please fill out the form below and return to:

* Emma Sykes, Museum Assistant, Wiltshire Museum, 41 Long Street, Devizes, SN10 1NS,
* Or e-mail: [emma.sykes@wiltshiremuseum.org.uk](mailto:emma.sykes@wiltshiremuseum.org.uk).

*We are an equal opportunities employer. We welcome applications from all suitably qualified persons.*

# **Your details**

|  |  |
| --- | --- |
| Title: | Surname: |
| First Names: | |
| Date of Birth: | Under 18: Yes / No |
| Address: | |
| Email Address: | |
| Telephone number: | |
| Mobile number: | |

(Some roles may be slightly changed to abide by our safeguarding policy if under 18)

**Are you currently?**

in full time employment Student full time

In part time employment Student Part time

Self-Employed Unemployed

Retired Looking after home/family.

**Occupation**

|  |
| --- |
| Employer/Place of study: |
| Job Title/Subject of Study: |

**Do you have professional qualifications that may be able to help the Museum?**

Professional Qualifications:

**Do you have experience in any of the following areas, please tick all that apply:**

Administration

Finance

Marketing and Communications

Research

Events Management

Stewarding/gallery guide

Experience in public facing roles

Knowledge of the needs of the local community

Working with young people

Any further skills that you feel would be useful to the Museum:

Please write a little about yourself, and what you hope to get out of volunteering with us.

**Please indicate the area(s) of volunteering you are interested in:**

Community Events

Education

Front of House

Visitor Engagement/Gallery Guiding

Building Maintenance

Gardening

Library/Archive

Assizes for Devizes: unlocking Wiltshire’s stories project

**If you ticked for the Assizes for Devizes Project, please let us know how you would like to get involved.**

Events

Community engagement

Research

Community champions

Other:

**Please let us know your availability:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Mon | Tues | Wed | Thurs | Fri | Sat | Sun |
| AM |  |  |  |  |  |  |  |
| PM |  |  |  |  |  |  |  |
| Evening |  |  |  |  |  |  |  |

If you are not able to commit to regular sessions, there may still be opportunities to volunteer on a more flexible basis with the Assizes for Devizes Project. Tick here if you'd like to be considered for these roles

**How did you hear about us?**

Social Media

Wiltshire Museum Website

Devizes Assize Court Website

Word of mouth

Newsletter

Other

Please state here:

**Referees**

Please provide details of two people who will be willing to act as a reference for you. We will need to contact these people for a reference before you can volunteer with us. Referees should be non-family members who have known you for at least one year.

**First Referee**

|  |  |
| --- | --- |
| First Name: |  |
| Surname: |  |
| E-mail Address: |  |
| Telephone Number: |  |
| Address: |  |
| Relationship to you: |  |

**Second Referee**

|  |  |
| --- | --- |
| First Name: |  |
| Surname: |  |
| E-mail Address: |  |
| Telephone Number: |  |
| Address: |  |
| Relationship to you: |  |

**Medical details**

* Do you have any disabilities, health conditions or other access needs that we may need to know about?
* Please also tell us about any arrangements or adjustments that would help you volunteer with us.
* If volunteering as a Garden volunteer do you have any allergies or plant intolerances we need to know about.
* If volunteering as a Garden volunteer to you have any disabilities or impairments we need to make adjustments for?

|  |
| --- |
|  |

**Emergency contact details**

|  |
| --- |
| Emergency contact name: |
| Emergency contact number (s): |
| Relationship to you: |

Data protection

If you apply to volunteer for the Society, we will use the information you supply to us to process your application and monitor recruitment statistics. Where we want to disclose information to a third party, for example where we want to take up a reference or obtain a ‘disclosure’ from the Disclosure and Barring Service, we will not do so without informing you beforehand.

Personal information about successful candidates will be held for the duration of their time with the Society and then will be held for the following six months, after which it will be destroyed, unless you have, by written request, asked us to either destroy it earlier, or allowed us to retain it for longer.

Personal information about unsuccessful candidates will be held for six months after the recruitment exercise has been completed, after which it will be destroyed, unless you have, by written request, asked us to either destroy it earlier, or allowed us to retain it for longer.

Any information is stored in line with our Privacy Policy and GDPR Regulations.

By giving us your details, you agree that you are happy for us to communicate with you regarding volunteering at the museum.

**If you want to hear from us about Museum matters other than your volunteering role, please tick here**

Photo Consent

During your volunteering time at the Museum photographs may be taken of you to be used publicly both internally and externally. Photos may be used for advertising on the website and social media pages and leaflets and in the Museum newsletter.

They may also be used as part of our work on the Assizes for Devizes: Unlocking Wiltshire’s stories project and its work with the National Lottery Heritage Fund.

**If you don’t want us to use your photos, please tick here**

Signed by Volunteer ……………………………………………

Date …………………….

**Thank you for completing this form**

[Application received ……………….. Replied ………….. Accepted ……………. ]

WANHS is a registered charity (no. 1080096) and Company limited by guarantee (3885649),

Wiltshire Museum, 41 Long Street, Devizes. SN10 1NS

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