

Please refer to "Becoming a CAB Volunteer" document before completing this application form

## **Contact Details**

Name	
Address	
Postcode	
FUSICOUE	
Home Phone	
Mobile Phone	
E-mail Address	

#### Please tell us the volunteering role you are interested in?

	General Adviser	Receptionist	Administrator
Cross or			
tick			

## Availability

#### Please indicate when you are available to volunteer (cross or tick)

	Mon	Tue	Wed	Thu	Fri
Morning					
Afternoon					

**Please note** for a General Adviser position you are expected to volunteer for a minimum of **6 hours per week.** 

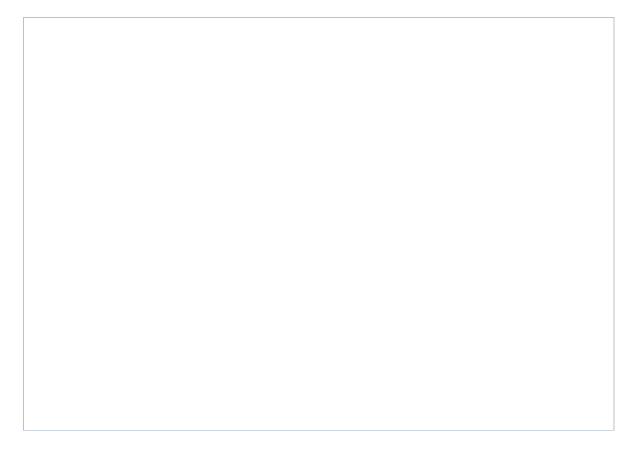
# **Please tells us anything else relevant to your availability** e.g. only available during school term times, maximum hours available

#### Where would you like to volunteer?

	Inverness	Raigmore	Aviemore
Tick or			
cross			

### About You

Tell us about yourself e.g. why do you want to volunteer with IBS CAB, what would you like to gain from volunteering with us and what skills and experience do you bring to IBS CAB (continue on separate sheet if needed)



# References

**Please give the contact details of two referees**. These should not include relatives and ideally at least one should be someone who knows you in a professional capacity.

Name	
Address	
Postcode	
Email	
Phone	
How do they know you?	
How long have they known you?	

Name	
Address	
Postcode	
Email	
Phone	
How do they know you?	
How long have they known you?	

## Source of Information

How did you find out about CAB volunteering? (e.g. friend, notice board, social media, internet etc.)

## Volunteers who wish to train as General Advisers:

Have you ever committed an offence under section 25 and 26 (1) (d) or (g) of the immigration act 1971? (These offences concern assisting illegal entry, falsifying documentation or obstructing the authorities investigating immigration offences. If you have committed one of the offences above you may still be able to be an advisor: however, we would have to contact the Office of Immigration Services Commissioner in order to discuss the issue.)

	Yes	No
Please tick or cross		

## **Reasonable Adjustment**

Please describe anything you require to enable your participation in an interview or if we offer you a volunteering role? (e.g. documents in large type, wheelchair access, communication aides, etc.) This information will only be used to help the bureau make reasonable adjustments and will remain confidential.



As part of the recruitment procedure we may collect and store sensitive personal data about you. We are required by law to obtain your consent to such data being recorded. It is our policy to store data relating to recruitment procedures for up to 3 months after the date on which it is submitted. Any information of this nature will be treated confidentially. Sensitive personal data is defined as information relating to any of the following: racial or ethnic origin, political opinions, religious beliefs, trade union membership, health, sexuality or sex life, offences and/or convictions.

For the purposes of the Act the Data Controller is Inverness, Badenoch & Strathspey CAB.

I declare the information given on this form is correct to the best of my knowledge and acknowledge that by signing this form I have given my consent to sensitive personal information being recorded and stored.

Signed	
Printed	
Date	

Please return your completed application to:

email	volunteer@invernesscab.org
Address	Volunteer Recruitment Officer 29 Union Street, Inverness, IV1 1QA