##### PLEASE USE CAPITAL LETTERS

|  |  |  |  |
| --- | --- | --- | --- |
| Title |  | Male [ ]  | Female [ ]  |
|  |  |  |  |
| First Names |  | Date of Birth | [ ] [ ]  / [ ] [ ]  / [ ] [ ] [ ] [ ]  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | National InsuranceNumber (If known) |  [ ] [ ] -[ ] [ ] -[ ] [ ] -[ ] [ ] -[ ]  |
|  |  |
| Surname |  |
|  |  |  |  |
| Any Previous Surnames |  | RSPB Member? Membership No. |  Yes [ ]  No [ ]  |
|  |
|  |  |  |  |
| House Number |  | Telephone Numbers | Preferred contact |
|  |  |  |  |
| House Name |  | Home |  | [ ]  |
|  |  |  |  |  |
| Street Name |  | Work |  | [ ]  |
|  |  |  |  |  |
|  |  | Mobile |  | [ ]  |
|  |  |  |  |  |
| Town |  | Fax |  |  |
|  |  |  |  |  |
| County |  | **How would you prefer to receive information?** |
|  |  |  |  |
| Postcode |  | By e-mail |  [ ]  |
|  |  |  |  |
| Country |  | Through the post |  [ ]  |
|  |  |  |  |
| Occupation |  | Email |  |
|  |
|  |  |  |  |
|  Who should we contact if you are taken ill whilst volunteering?

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Relationship to you |  |
|  |  |  |  |
| Home Phone |  | Work Phone |  | Mobile Phone |  |

 |
|  |  |  |
|  **To help us ensure your safety:** |  |
| To help us allocate you safe and appropriate work; please tell us of any:* Medication that you are taking that a First Aider or Doctor would need to be aware of?
* Activity you may find difficult for health or other reasons?
* Other information we may need to ensure your safety e.g. hearing or vision difficulties, ability to communicate or understand instructions.
 |  |
|  |  |  |  |
| **Do you have a valid UK driving licence?** Yes [ ]  No [ ]  |

|  |  |  |
| --- | --- | --- |
|  How did you hear about volunteering with the RSPB? |  |  |
|  |  |  |
| Family/Friends [ ]  | *Birds* magazine [ ]  | RSPB Website [ ]  |
|  |  |  |
| Volunteering Information Brochure [ ]  | Other – please indicate |  |  |

|  |
| --- |
|  **I have the following experience of volunteering (for the RSPB or any other organisation):** |
|  |
|  |  |  |  |
| **Please add any other information you think might be helpful. Are there any particular volunteer activities you do not want to do?** |
|  |
|  |
|  **I have the following skills/experience I would like to offer the RSPB:** |
|  |

|  |
| --- |
| **Referees** |
|  |
| Please supply the names and addresses of two people aged 18 or over who know you well e.g. a neighbour, head teacher, friend etc. Please note that these **cannot be someone who is related to you, who lives at the same address as you**, **or lives at the same address as the other referee**. **Please Use Capital Letters** **REFEREE 1 REFEREE 2** |
| Title |  |  |  |
|  |  |  |  |
| First Names |  |  |  |
|  |  |  |  |
| Surname |  |  |  |
|  |  |  |  |
| Any previous surnames |  |  |  |
|  |  |  |  |
| Address |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Postcode |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Is this address | Home [ ]  or Business [ ]  |  | Home [ ]  or Business [ ]  |
|  |  |  |  |
| E-mail |  |  |  |
|  |  |  |  |
| Day time telephone no. |  |  |  |
|  |  |  |  |
| Occupation |  |  |  |

|  |
| --- |
| Criminal Offences |
|  |  |  |  |
| Do you have any unspent convictions or any pending? Yes [ ]  No [ ] If yes please give details |
|  |
| Please note that a conviction will not necessarily exclude you from volunteering with the RSPB, but will be taken into account when assessing your suitability. Any information given will be held in confidence. If you have any concerns about filling in this declaration please contact the Volunteers' Office on 01767 680551 or email volunteers@rspb.org.uk. |
|  |  |  |  |
| I understand that: |
|  |  |  |  |
| * I may be working with confidential material and I will keep this material confidential.
* Insurance for my personal effects is my responsibility.
* If the information declared on this form is found to be incorrect, it may disqualify me from this role, or result in the termination of my volunteering.
* I understand this agreement to volunteer for the RSPB is binding in honour only and is not intended to be a contract of employment.
* The RSPB will take up references from the referees I've provided, and my volunteering is subject to these being satisfactory.
 |
|  |  |  |  |
| Signed |  | Date |  |
|  |  |  |  |
| We understand your privacy is important to you. The personal information you provide to us will only be used for the purposes of managing your volunteering with the RSPB. |

**If you are not already a member of the RSPB, please read the following**

*We respect your privacy and will not sell your personal data to any third party.*

The RSPB and RSPB Sales Ltd will use your details to tell you about our conservation and fundraising; to run your membership; to conduct analysis and to contact you for research purposes. If you do not wish to receive marketing information in the following ways, please tick the relevant box.

**[ ]  Mail [ ]  Telephone** **[ ]  Email** **[ ]  Text**

For further information on the full range of our activities and your privacy choices please go to the Privacy Policy on our website [www.rspb.org.uk](http://www.rspb.org.uk) or contact Supporter Services on 01767 693680.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Thank you for taking the time to complete the form. Please return it to the address below.

|  |  |  |
| --- | --- | --- |
| ***Please return this completed form to:******Katie Aspin******Email –*** ***katrina.aspin@rspb.org.uk******By Post -* The RSPB, Northern England Region,** Westleigh Mews, Wakefield Road, Denby Dale, Huddersfield, HD8 8QD |  |  |
|  |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

 |

***The Royal Society for the Protection of Birds (RSPB) is a registered charity: England and Wales no. 207076, Scotland no. SC037654***

**VOLUNTEER'S LINE MANAGER TO COMPLETE – PLEASE USE CAPITAL LETTERS**

Volunteer’s Role Title:

Volunteer’s Line Manager:

Reserve/Location volunteer will be volunteering at:

Vacancy ID: Start Date:

***Young People & Vulnerable Adults Vetting Toolkit*** used to assess this role? YesNo 

If Yes ***Young People & Vulnerable Adults Vetting Toolkit*** score 

**Identity Checks -** Form of Identity Provided:

Passport (any nationality) Original UK Birth Certificate

 (Issued within 12 months of date of birth)

UK Driving Licence Valid photo identity card

(either photocard or paper) (EU countries only)

Seen by (print name): Date seen:

Do you need any more volunteers in this role or shall we archive this role for you – **MUST BE COMPLETED**



BIRD SURVEYOR – TWITE RECOVERY PROJECT

KATIE ASPIN

SOUTH PENNINES