



Chichester City Council

Application to become a City Council Volunteer

Personal details:

Title: Mr Mrs Miss Ms Other

Name: Date of Birth:/...../.....

Address:
.....

Postcode:

Contact Number:

Email address:

Emergency Contact Details:

Name: Relationship to volunteer:

Address:
.....

Contact number:

Employment status:

Employed Unemployed Retired Student

Chichester City Council is committed to keeping you safe. Do you consider yourself to have a disability or medical condition that you think we should be aware of?

Yes No

If yes, please let us know what we should be aware of:-

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We are positive about promoting equality of opportunity for everyone; this includes making reasonable adjustments to encourage disabled people who wish to take part in volunteering activities. If you require any assistance, please can you state below what type of assistance we can give you:

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Are you currently taking medication that you would like to make us aware of?:

Yes No

If yes, please specify:

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.....

Types of Events:

What type of events are you interested in volunteering at?

- All City Council activities (e.g. Gala parades, Remembrance Sunday.) Litter picking
 Fundraising (e.g. Mayoral street collections) Sporting/Outdoor events
 Green space maintenance Other

If 'Other', please specify

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Reason for volunteering:

It is useful for us to know a bit more about what reason(s) you have for volunteering. Please tick one or more of the boxes below:

- Paid Employment Skills/Experience Qualifications Make good use of time
 Give something back to the community Mental Wellbeing Physical Wellbeing
 Social Wellbeing Other (Please specify below)

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Data Protection and Fair Processing Form

The information that you have provided in this application form will be held in a 'Volunteer Database'. This is a database of all volunteers in Chichester City Council who have consented to their inclusion.

Further information can be found here: <https://chichestercity.gov.uk/terms-conditions/>

Information will not be disclosed to other third parties by Chichester City Council, except where required by law, by any order made by the Secretary of State or by a Court Order. Some of the information that you have provided on this questionnaire is deemed to be 'Sensitive Personal Information' under the Data Protection Act (2018).

Please sign the declaration below indicating that you give consent for the processing of your information, as described above, for the purposes stated within this application.

However, from time to time we would like to contact you with details of other volunteering opportunities, volunteer development/training we provide.

Chichester City Council will only use your personal information in relation to your application as a volunteer and for the following additional purposes:

Purpose 1: To produce anonymised reports for statistical and work programming purposes.

Purpose 2: To provide you with information that may be directly related to your volunteering role.

Purpose 3: To contact, and to consult you, regarding wider volunteering activities/opportunities with Chichester City Council.

We require your consent to contact you for purpose Number 3 above. If you are happy to be contacted for this purpose, please tick this box

My preferred method of contact is (please tick all that apply).

Post Email Telephone Text message

Print Name:

Signature:

Date:

Parental consent is required for all persons under the age of 16 years of age engaging in volunteer opportunities with Chichester City Council. Please sign if applicable:

Parent/Guardian:

Print name:

Signature:

Email Address:

Phone number:

Relationship to under 16 volunteer: