



Pedal Power Project

Volunteer Application Form

Surname:..... Forename:

Address:

.....

..... Postcode:.....

Telephone No. (day) (eve)

Email:.....

Occupation: Date of birth:

Next of kin (if under 18)

Name:.....

Relationship:.....

Address:

Telephone No: (day)..... (eve).....

Please give details of voluntary and paid work from the age of 16 onwards (continue on a separate sheet if necessary) starting with your last Employer/Volunteer Organisation-Please include periods of education or unemployment

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What are your hobbies & or special interests?

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Please indicate with a tick which of the following role(s) you would like to do:

- Cycle Hire Operator
- Tea Room Assistant
- Newsletter Contributor
- Cycle Support
- Reception/Bookings
- Administrator

Other (please state)

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Please state briefly your reasons for expressing an interest in volunteering with the Pedal Power Project.

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When can you start? What hours are you able to volunteer?

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Rehabilitation of Offenders

Volunteers should note that Pedal Power Project is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974. This means that applicants are not entitled to withhold information about convictions. Any information given will be completely confidential, and will be considered only in relation to determining whether a particular voluntary placement is appropriate.

Do you have any criminal convictions? YES / NO

If YES, please give details

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Other (please state)

Referees

1. Name.....	2. Name.....
Address	Address
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.....
.....
Relationship	Relationship
Tel No.	Tel No.

(Please note: we cannot accept References from Family Members)

Please return the completed form to:

Volunteer Application Officer
Pedal Power Project
Pontcanna Caravan Park
Dogo Street
Cardiff
CF11 9JJ
Phone : 02920 390713

E-mail: info@cardiffpedalpower.org
www.cardiffpedalpower.com

I understand that the appointment, if offered, will be subject to the information given on this form being correct.

Signature Date.....