

Section A—Introduction

This form is for organisations wishing to engage volunteers for **one-off opportunities**. The details on this form are entered into a database system which allows for effective matching of potential volunteers with suitable opportunities and organisations.

Section B—Guidelines for Form Completion

Please use BLOCK CAPITALS and a dark coloured pen when completing this form. Please complete as much as you can. If you require any assistance please call us on 01324 692000.
 When completed post to: Volunteer Centre Falkirk, Unit 6, Callendar Business Park, Callendar Road, Falkirk, FK1 1XR.

Section C—Data Protection Act Statement

Your privacy is important to us. We are registered under the Data Protection Act 1998 for the collection, storage and processing of limited personal information for disclosed purposes. All of our electronic data is stored securely in compliance with the Act.

The only personal information we collect for Volunteer Opportunities is a **Contact Name** (Section E). We will only disclose the Contact Name to potential volunteers if you give us permission to do so (see Section E). Denying us permission to disclose it means that the Contact Name will **only** be used by authorised officers of CVS Falkirk and District for the legitimate purposes of engaging volunteers within your organisation. Supplying a Contact Name would be extremely useful to us (and your own organisation), but it is not essential.

We **will not** disclose personal data to any other parties without your prior, written consent. You have the right to see what data we store about you, how we use it and to prevent us from using it. We reserve the right to charge a small administration fee (to cover our costs) for access to this information.

If you have any queries or concerns regarding this Statement then please write to: **Chief Executive Officer, Volunteer Centre Falkirk, Unit 6, Callendar Business Park, Callendar Road, Falkirk, FK1 1XR.**

Section D—Opportunity Details

Title of Opportunity: _____
e.g. driver, adviser, committee member, befriender. The word 'volunteer' needn't be in the title.

Name of Organisation: _____

Summary of Opportunity: *Max. 35 words. Try to 'sell' the opportunity to potential volunteers (i.e. interesting and brief). For one-off opportunities you should include the following things within the summary: where it happens, what sort of things the volunteer is expected to do and who will be benefiting.*
This form is for one-off opportunities - you do not need to provide a full description or complete many of the other sections which are required for other opportunities, therefore try to include as much information as possible in this summary section.

Number of volunteers required for this opportunity: _____
State how many volunteers you require to perform the specific tasks for this particular opportunity.

When does this Opportunity start: _____ / _____ / _____ end: _____ / _____ / _____

Section E—Opportunity Contact

Contact Person: _____
Contact person for this particular opportunity.

Job Title: _____
Position within organisation.

Telephone Number: _____ Fax Number: _____

E-mail Address: _____
An e-mail address will maximise the efficiency of the database system but it is not essential if you don't yet have one.

Are we able to give these Contact details to potential volunteers? Yes No
Answering No to this question will result in all potential volunteers being routed through the CVS.

Section F—Policy Related

Are there any restrictions on who can be a volunteer for this Opportunity: Yes No

If Yes: Minimum age: _____ Maximum age: _____

Gender restrictions: _____

Other restriction(s): _____

We need to ensure people are not being discriminated against because of their age, gender, ethnic origin etc.

Explain why restrictions apply: _____

What selection method(s) will be used for prospective volunteers: *Tick all that apply.*

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Application Form | <input type="checkbox"/> Disclosures (criminal record check) | <input type="checkbox"/> Interview |
| <input type="checkbox"/> Induction/training | <input type="checkbox"/> References | <input type="checkbox"/> Trial period |
| <input type="checkbox"/> Informal chat | <input type="checkbox"/> Other: _____ | |

What type of insurance(s) cover this Opportunity: *Tick all that apply.*

- | | | |
|---|--|---|
| <input type="checkbox"/> None | <input type="checkbox"/> Personal Accident | <input type="checkbox"/> Public Liability |
| <input type="checkbox"/> Professional Indemnity | <input type="checkbox"/> Other: _____ | |

Section G—Financial Aspects

Are travel expenses available to volunteers for this Opportunity: Yes No

Please supply the mileage rate (if applicable): _____

Are there any other expenses available to volunteers: *e.g. lunch, evening meal* Yes No

If Yes, please detail: _____

Section H—Form Completion Information

Your Name: _____ *Please include title, forename and surname.*

Your Job Title: _____

IMPORTANT NOTICE: Before signing this form it is important that you review what has been provided and ensure that the information is accurate and complete. You must also ensure that the information provided is compliant with your own organisations' policies and views on the disclosure and provision of such information.

By signing here you are declaring that you are authorised to sign this form on behalf of your organisation and authorise us to use the data provided as detailed in our Data Protection Act Statement (Section C).

Would you like further information on engaging volunteers within your organisation: Yes No

Signed: _____ Date: _____

Thank you for taking the time to complete this form. You should copy this form for your own records.