

Volunteer Opportunity Registration Form

1. Please see the guidance notes before completing this form. Fill in a separate form for each different opportunity.

Title of Opportunity e.g. driver, administrator etc:	
Name of Organisation:	
Contact name for this opportunity:	Position:
Tel No:	E Mail:

2. Please give a summary of the opportunity (*no more than 35 words*). This is your chance to “sell” the opportunity to people so try to make it sound interesting and worthwhile.

3. Fuller description of the opportunity (*no more than 150 words*).

4. Where does the opportunity happen and what are the travel details (no more than 35 words)?

5. Which **one** of the following activities best matches the volunteer opportunity?

Administration/Office work	Conservation/Gardening	Marketing/PR/Media
Advice/Information giving	Counselling	Online volunteering
Advocacy/Human Rights	Disaster/Emergency relief	Playschemes/Children's Clubs
Animals	Driving/Escorting	Practical/DIY
Arts (Music/drama/crafts)	Equal Opps/Race Relations	Research/Policy work
Befriending/Mentoring	Finance/Accountancy	Residential Volunteering
Campaign/Lobbying	Fundraising	Short term/Seasonal
Care/Support worker	Home-based Volunteering	Specialist/Technical
Catering	Journalism	Sports, outdoor activities
Charity Shops/Retail	Justice/Legal assistance	Tutoring/Supporting Learners
Comm./Economic Dev. Work	Languages/Translating	Volunteering for under 16s
Committee Work	Library/Information Man.	Volunteering Overseas
Computing	Management/Business Skills	Youth work

6. Which **one** of the following subjects/issues best matches the volunteer opportunity?

Advice Work	Environment	Museums/Galleries/Heritage
Animals	Ethnic minorities	Offenders/Ex-offenders
Anti-poverty work	Families	Overseas aid/Developing world
Arts (music/drama/crafts)	Gender/Sexuality	Physical disability
Carers	Head Injury	Political./Social Awareness
Children	Health/Hospitals/Hospices	Refugees/Asylum seekers
Community Work	Homeless/Housing	Religion/Faith
Counselling/Listening	Human/Civil rights/Justice	Sensory impairment
Crime/Safety	Intergenerational Issues	Sport/Outdoor activities
Disaster/Emergencies	Learning disabilities	Tackling Unemployment
Drugs/Alcohol issues	Men's Groups	Women's Groups
Education/Literacy	Mental Health	Young people
Elderly		

7. Are there any restrictions on who can be a volunteer?

Minimum Age: _____ Maximum Age: _____ Gender restrictions: _____

Please explain why restrictions apply: _____

8. Number of volunteers needed for this opportunity:

9. What skills, attitudes, experience does a person need to do this volunteer opportunity?

10. If you work from home and would rather your contact details were not published on the web / directories you can choose to display the Volunteer Centre's details with the opportunity.

I would like to use the Volunteer Centre's details

11. When does the volunteer opportunity start? (dd/mm/yy): _____

Is there an end date? If yes please enter (dd/mm/yy): _____ **or** is it ongoing (tick if YES):

12. What are the **minimum** hours per day, week etc that a volunteer would need to do for this opportunity e.g. 4 hours per week, 2 hours per fortnight, etc:

_____ Hours per day week fortnight month quarter]

Other (please describe): _____

13. Is there a minimum commitment expected of the volunteer e.g. 6 weeks, 3 months etc.

_____ (Enter a number) Days Weeks Months Years

Other (please describe): _____

14. Please tick when the opportunity happens. Tick as many boxes as appropriate.

Day of Week	Morning	Afternoon	Evening
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Does the opportunity take place in school holidays?

Yes No

Does the opportunity take place in term-time?

Yes No

15. What types of insurance(s) cover this opportunity?

<input type="checkbox"/>	Public Liability	<input type="checkbox"/>	Personal Accident	<input type="checkbox"/>	Professional Indemnity
<input type="checkbox"/>	Employers Liability	<input type="checkbox"/>	None	<input type="checkbox"/>	Other

16. What selection method(s) will be used for prospective volunteers?

<input type="checkbox"/>	Application Form	<input type="checkbox"/>	POCVA Check	<input type="checkbox"/>	Induction/training
<input type="checkbox"/>	References	<input type="checkbox"/>	Informal chat	<input type="checkbox"/>	Trial Period
<input type="checkbox"/>	Interview	<input type="checkbox"/>	Other(s):		

17. Will you use the Volunteer Centre application procedure or do you prefer to use your own? Please give details:

18. Training and Support for Volunteers

Yes No but would like further information

- Will the volunteer be offered induction/start up training?
- Will the volunteer be offered on-going training?
- Will the volunteer be offered support?

19. Please give a brief description of induction, ongoing training and support for the volunteer (max 35 words):

20. Will the volunteer have a named contact person at your organisation? Yes No

If yes, who will that be? _____

21. Is there wheelchair access where the opportunity happens? Yes No

22. Are there wheelchair accessible toilets where the opportunity happens? Yes No

23. Can you accept volunteers with special support needs? Yes No

If yes, please give details

24. Are travel expenses available for volunteers? Yes No

25. Is childcare/are childcare costs available for volunteers? Yes No

If yes, please give details on how and when expenses are paid e.g. we pay public transport rates and reimburse volunteers every week. Also include mileage rates if applicable. (max 35 words)

26. Who funds this volunteer opportunity? (Please see guidance notes)

Business Sector	Earned Income
Central Government – Westminster	Other European Money
NI Government Department	Health (Boards/Trusts etc)
Charitable Trusts	Local Council
Communities Safety Partnerships	Local Strategic Partnership Board
Donations	Lottery Boards (Community Fund etc)
Other	

27. Are you happy for this opportunity to be displayed on - www.volunteernow.co.uk

Yes No

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Name:
Position in Organisation:
Signature:
Date:

Thank you for completing the form. Please keep a copy for your own records. The information you have provided will be used for the purpose of volunteer recruitment and management and to produce statistical reports. The Volunteer Centres Northern Ireland network reserves the right not to publish opportunities on the web as appropriate.

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