A close up of a sign

Description automatically generated

**Volunteer Application Form**

**Community Champion Role**

Thank you for taking the time to apply to volunteer with Neighbourhood Watch.

The information you provide within this application will be used by **Neighbourhood Watch Network (NWN)**, your area’s **Neighbourhood Watch Association (FAA),** and **Neighbourhood Policing Team (LPT/SNT)** to support you in your volunteer role, and to send you crime prevention messages and information, and newsletters relevant to the work of Neighbourhood Watch and your community.

Any information you give below will **NOT** be shared with anyone else or used for any other purpose without your explicit consent, in line with **GDPR** regulations (please see permissions below).

Please complete digitally (or in **BLOCK CAPITALS** if handwritten) the details below and return to[***cheryl.spruce@ourwatch.org.uk***](mailto:cheryl.spruce@ourwatch.org.uk)***.***

**ABOUT YOU**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Title |  | | | Date of birth/or  Year of Birth |  | |
| Full name |  | | | | | |
| Home address inc postcode |  | | | | | |
| Home phone number |  | Mobile phone number | | | |  |
| Email address |  | | | | | |
| Role applying for | COMMUNITY CHAMPION | | | | | |
| Are you currently a Neighbourhood Watch member or coordinator? | | | Yes/No (please delete as appropriate) | | | |
| Due to the nature of our work, please could you indicate if you have any unspent Criminal Convictions? | | | Yes/No (please delete as appropriate) | | | |
| Sometimes we work with vulnerable people within our community and therefore, would you be willing to have a DBS check? | | | Yes/No (please delete as appropriate) | | | |
| For the interview, do you have any access or other needs that we could help to accommodate for you? Access/sight/hearing etc | | |  | | | |

**Skills and Previous Experience**

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| --- |
| Tell us about any volunteer roles or experience that you have previously had or are now involved in within your community |
|  |
| Tell us how you think your skills and knowledge will be beneficial to the role that you have applied for |
|  |
| Is there any additional training or support you feel you would need to fulfil the role you have applied for? |
|  |
| Some roles require you to be online and use various platforms, such as Facebook, Twitter, email, etc. Would you say that you are suitably proficient with this and if not, what training would you require? |
|  |

**You and Neighbourhood Watch**

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| --- |
| What inspired you to apply to volunteer with Neighbourhood Watch? |
|  |
| Have you had any experience of working with Neighbourhood Watch before and if so, what did you do? |
|  |
| What is your knowledge of Neighbourhood Watch locally? Do you have any engagement with local schemes or projects that Neighbourhood Watch or other groups run in your community? If so, please tell us a little more about this. |
|  |

**Please read through the following statements and tick those you are in agreement with.**

**Permissions**

* I agree for Neighbourhood Watch Network to use my details for Neighbourhood Watch purposes relating to my role as a volunteer
* I am happy for my details to be shared with the local policing team so they can offer support
* I would like my details to be added to the Neighbourhood Watch database and to receive messages and newsletters from Neighbourhood Watch Network
* I am happy for my details to be shared with the local Neighbourhood Watch Association to receive information relevant to my role and the community
* I agree to have a DBS check if required

**Declarations**

* I have read and understood the role description for the role applied for above and agree to all terms and conditions of the role
* I have read and agree to adhere to the NWN Code of Ethics and Values, the Social Media Policy and Email guidelines in my role as a NW volunteer
* I confirm that all details I have provided about me in this application are accurate.

**SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The following information will be used in complete anonymity to help us understand the range of people applying for roles and will have no influence on your application and is an important diversity monitoring tool.**

|  |  |  |
| --- | --- | --- |
| How would you best describe your ethnicity | **White background**   * English/Welsh/Northern Irish/Scottish/British * Irish * Gypsy or Traveller * Any other white background   **Mixed background**   * White & Black Carribean * White & Black African * White & Asian * Any other mixed/multiple ethnic background   **Other**   * Arab * Any other ethnic background   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Asian background**   * Asian British * Indian * Pakistani * Bangladeshi * Chinese * Any other Asian background   **Black background**   * Black British * Black Carribean * Black African * Any other Black background * Prefer not to say |

|  |  |
| --- | --- |
| How would you best describe your gender? | * Male * Female * Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * Rather not say |

|  |  |
| --- | --- |
| ***DISABILITY: We are asking the following questions to enable us to make adjustments to meet any access or other needs.***  *The Disability Discrimination Act 1995 (DDA) defines a person as disabled if they have a physical or mental impairment which has a substantial and long term (i.e. has lasted or is expected to last at least 12 months) adverse effect on one’s ability to carry out normal day-to-day activities. This definition includes conditions such as cancer, HIV, mental illness and learning disabilities.* | |
| Would you describe yourself as having a disability as defined in the above definition? | Yes/No |
| If you have answered YES to the question above, could you please outline any access or other needs that we need to accommodate | |