**Derbyshire Gypsy Liaison Group Volunteer application form**

**Name**: ……………………………

**Address:** ……………………………………………………………...

**Tel:** ……………………. **Email:** …………………….

**Date of Birth:** …………………..

1. Why do you wish to become a Volunteer Befriender?

2. Do you have any work experience or skills which might be useful for Volunteer Befriending?

3. Do you have any hobbies or interests?

4. Please indicate when you would be available to volunteer (days/times).

5. Are you prepared to travel a short distance to a home if they live slightly outside your immediate area or be able to support anyone who may frequently move .? (N.B. travel expenses are paid). Please tick:

□ Yes, I have access to a car and could travel

□ Yes, I could use public transport

□ No

Please provide details of any special needs or relevant medical conditions.

7. Are there reasonable adjustments that we could make as part of the recruitment process that would enable you to enjoy equality of opportunity in seeking a befriending role with us?

8. Please provide names, addresses and telephone numbers of **two Referees** for the Befriending Scheme. (Referees cannot be relatives).

**Reference 1 Reference 2**

Name: …………………………… Name: .….………………………….

Address: ………………………… Address: .…..………………………

Tel No …………………………… Tel No: .…..…………………………

Email: …………………………… Email: ………………………………

**I confirm that all the details on the application form are correct and accurate.**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

E Mail through to [info@dglg.org](mailto:info@dglg.org)

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