

VOLUNTEER EXPRESSION OF INTEREST FORM

PERSONAL DETAILS

Full name	
Address	
Date of birth	
Home phone	
Mobile number	
Email	

AREAS OF INTEREST

<input type="checkbox"/> Emergency Worker Volunteer	<input type="checkbox"/> NILS Interviewer
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CURRENT EMPLOYMENT STATUS

<input type="checkbox"/> Employed full time	<input type="checkbox"/> Studying	<input type="checkbox"/> Looking for employment
<input type="checkbox"/> Employed part time	<input type="checkbox"/> Retired	<input type="checkbox"/> Other: _____

CERTIFICATES AND LICENCES

Current driver's licence	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Police check	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Working with children check	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other licences/certificates		

REASON FOR WANTING TO VOLUNTEER

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CURRENT/PAST VOLUNTEER WORK (if applicable)

SKILL SET (please attach a copy of your resume if you have one)	
Previous employment:	Qualifications and training:
Skills:	Hobbies and interests:
Work restrictions: ie. Do you currently have an injury or illness that restricts your ability to work or carry out specific physical tasks.	

AVAILABILITY			
Days	Times	Days	Times
Monday		Thursday	
Tuesday		Friday	
Wednesday		Comments:	

Thank you for your interest in volunteering. Please email this completed form (along with your resume, if available) to:

Bendigo – reception@bffs.org.au

Shepparton – sheppartoner@bffs.org.au

Alternatively, feel free to drop it off at our offices directly.