

Volunteer Befriender Application Form (2022)

Name:

Address:

Tel:

Email:

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

2. Do you have experience, skills or personal qualities which you think would be useful for Volunteer Befriending?

3. What are your hobbies or interests?

4. We ask befrienders to commit to up 3 hours per week and to volunteer for at least 12 months. Please indicate when you would be available to volunteer (days/ times) and how long you can commit to this role for.

5. Please provide details of any support needs, relevant medical conditions and/or any reasonable adjustments that we could make to support you through the recruitment and selection process?

6. Please provide names, addresses and telephone numbers of two Referees what we can contact to ask about your skills and suitability for the role (Referees can not 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: _____