



## VOLUNTEER/PLACEMENT APPLICATION FORM

(Please Complete in Black Ink and BLOCK CAPITALS)

NAME:

ADDRESS:

HOME TEL NO:

WORK TEL NO:

MOBILE TEL NO:

EMAIL:

North Kent Mind works with vulnerable adults, all volunteers are required to be DBS checked. Do you have any unspent criminal convictions? If yes, please include details below. This will not necessarily affect your application.

Please describe briefly why you want to volunteer for North Kent Mind:

Please give us an overview of your skills/experience/training and education relevant to volunteering (you can attach an additional CV if you wish) :

Please tell us which area or type of volunteering you are interested in?	
Please tell us about your interests which may be relevant to volunteering:	
We need the details of two people whom we can contact for references:	
NAME:	
ADDRESS:	
TEL NO:	EMAIL:
NAME:	
ADDRESS:	
TEL NO:	EMAIL:
AVAILABILITY FOR VOLUNTEERING:- DAYS/TIMES	
<p><b>Please send completed application form to:</b> Volunteering Coordinator, North Kent Mind, 20 West Hill, Dartford, Kent DA1 2EP Or email: <a href="mailto:WendyHeathcote@northkentmind.co.uk">WendyHeathcote@northkentmind.co.uk</a></p>	
<b>OFFICE USE ONLY:</b> DATE RECEIVED:  DATE OF SCREENING:  WHO WITH:	OUTCOME:  DBS:  TRAINING:

#### North Kent Mind

Registered in England Company No. 5093370  
Limited by Guarantee  
Registered Charity No. 1103790  
Affiliated Local Association

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Fax: (01322) 285294  
Website: <https://northkentmind.co.uk>  
Email: [admin@northkentmind.co.uk](mailto:admin@northkentmind.co.uk)