

Puppy socialisation volunteer application form



Surname:

First Name:

Address:

Daytime telephone no.:

Mobile telephone no.:

Email address:

I am over 18 years old ☐

How did you hear about the opportunity to be a BCDH volunteer? *Tick all that apply*

1. BCDH website
2. Newspaper *(please specify)*
3. Volunteer Centre/CVS
4. Personal recommendation
5. Other *(please specify)*

Please indicate what times you may be free to volunteer when needed.

Monday
AM PM
☐ ☐

Tuesday
AM PM
☐ ☐

Wednesday
AM PM
☐ ☐

Thursday
AM PM
☐ ☐

Friday
AM PM
☐ ☐

Saturday
AM PM
☐ ☐

Sunday
AM PM
☐ ☐

Do you have any pets at home?

☐ Yes (please state) _____ ☐ No

Tell us briefly about any experience you have caring for dogs.

Tell us briefly why you would like to be a BCDH volunteer.

Criminal Convictions

Do you have any unspent criminal convictions?

Yes ☐

No ☐

If you have ticked yes please give details below:

Details of our policy on working with volunteers with criminal records is available from the Vol. Coordinator

Data Protection Act

Please sign below to give permission for BCDH to store the information on this application form. Full details of the BCDH policy on data protection relating to information on volunteers is available from the Volunteer Coordinator

SIGNATURE.....

DATE.....

Thank you for your interest in BCDH

OFFICE USE ONLY Input on RE ☐ TQ Sent ☐ Comments:

Equal Opportunities Monitoring Form - Confidential

Please return this form with your completed application form. It will be separated from your application before short-listing and is not used when making a decision as to whether to invite you for interview. It is used purely for monitoring purposes.

Gender

(please circle)

Female

Male

Age

(please circle)

18 – 24

25 – 34

35 – 44

45 – 54

55 – 64

65 – 74

75+

Ethnic Group

(Please indicate with a tick which ethnic group you belong to)

White

Black-Caribbean

Black-African

Black-other

Indian

Pakistani

Bangladeshi

Chinese

Irish

Other

Do you have a disability? *(please circle)*

Yes

No

Are you registered disabled? *(please circle)*

Yes

No

Thank you for completing this application pack.

Please return it to the address below:

Volunteer Co-ordinator
Bath Cats and Dogs Home
The Avenue
Claverton Down
Bath
BA2 7AZ