

# Volunteering with South Gloucestershire Libraries

The library service has several fulfilling volunteering opportunities which can be short or long term.

Digital Champions

Duke of Edinburgh

Event Support Volunteers

Summer Reading Challenge Volunteers

Home Library Service Volunteers

If you’d like to find out more – please speak to a member of staff. We'll answer your questions before you start and give you training.

Please fill in this form if you would like to volunteer with South Gloucestershire Libraries.

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| **Part A: Personal details** |
| Which library volunteer role would you like to apply for? |
| Title: | First name: | Surname: |
| Your date of birth: |
| Address:Postcode: | Best telephone number (s) to contact youMobile: Home:Work: |
| Email address: |

**Please tell us about yourself by answering the following questions**

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| Why are you interested in volunteering with us? |
| What skills or interests do you have that you would like to use in this voluntary role? |
| **Part B: Availability** |
| Where would you like to volunteer? Please number all libraries that apply in order of preference:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bradley Stoke |  | Cadbury Heath |  | Downend |  |
| Emersons Green |  | Filton |  | Hanham |  |
| Kingswood |  | Patchway |  | Winterbourne |  |
| Staple Hill |  | Thornbury |  | Yate |  |

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| --- | --- | --- |
| Which days and times you would like to volunteer? | Morning | Afternoon |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |
| Saturday |  |  |

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**To ensure volunteers are suitable, it is very important that we learn about what you are doing now and what you have been doing eg; school, raising a family, in employment or looking for work.**

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| Please list schools / colleges you have attended and include start and finish dates (month and year).  |
| * Please briefly describe your current and previous work experience and include start and finish dates. (This could be paid employment, work experience, voluntary or community work.)
* Please also list gaps in your work experience, tell us what you were doing during that time and include start and finish dates.
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| Are you working towards any accreditation that voluntary work with the library service would help you with e.g.; Duke of Edinburgh’s Award? |
| If you would like to be contacted about future volunteering opportunities, please tick this box |

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| **Part C: References**  |
| The Library Service has a duty to ensure that all volunteers we recruit are suitable. For this reason, we require a minimum of **2 written references**. At least one referee should be a present or most recent employer. If the candidate is not currently in employment or the last employer cannot give a reference because the organisation no longer exists, then a reference from a professional person should be sought. Alternatively, please provide **two personal references.** This can be a friend or ex colleague (not a family member) that you are in contact with and have known for at **least 5 years.** If the candidate has just left school, college or university a reference should be from a headteacher, head of year or head of faculty.You can request disclosure of references under the *Freedom of Information Act*. |
| I give consent for South Gloucestershire Council to request references in respect of this application prior to any interview.Signed by volunteer : Date: |
| **Reference 1** |
| Name of company/organisation/school/ college:Address including postcode:Telephone Number:Email Address: | Title:First name:Surname:Job title of employer/teacher **or** nature of relationship if personal reference: | Date they have know you from:Number of years they have known you: |
| **Reference 2** |
| Name of company/organisation/school/ college:Address including postcode:Telephone Number:Email Address: | Title:First name:Surname:Job title of employer/teacher **or** nature of relationship if personal reference: | Date they have know you from:Number of years they have known you: |

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| **Part D: Declaration information** |
| This post may be subject to a Disclosure and Barring Service Check (DBS).  You must satisfy yourself if you need to declare to the Council any conviction or caution that you have received as designated under the Rehabilitation of Offenders Act 1974 and S.139 of the Legal Aid, Sentencing and Punishment Act 2012. Please read the Guidance regarding Convictions and Spent Convictions before you apply for this position.**Home Library Service Volunteers only**This post is subject to a Disclosure and Barring Service Check (DBS) and is exempt from the [Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 SI 1975/1023](http://r20.rs6.net/tn.jsp?f=001lt14PT1jo6AWDeZUfC50zap6euomOpmdZMX2U1zuUWW0sztYTOVfItRnNX7EGOAriwxGBqeojZkejFyxk-RCFfaJ3oTy_JQ9twSWxfJWKVKd-CtNuxIxRM4BwFX2cPY8IorZn2qCoqT8VL2wBXhTB3uV2jNT6P9GsbtRdXUbwVZPnj45AGy2iVRynhPa9MWOxbsMUDNeFZ9h9gOACdk5OqCkjNIMRRrJPZSk3lvX83c=&c=E5K8-x-VXisCGJO3M9NTlHbwU_RY_XSJFpu2DaBYr9e2gIX8l35oJQ==&ch=2eW6YkOyHT75LyEg41f6xJHQEJ5SxevlS6FGTHbhQn6vSeLa3Hzvjw==) **\*** All offences will be considered. Please read the guidance to establish if you are exempt from the Act, before applying to be a Home Library Service Volunteer.  |
| **Do you have any unspent convictions?** Yes / NoIf YES, please speak to the Librarian or Library Supervisor. *Staff make note of the date of this conversation here:* |
| **Do you have the right to work in the UK?**  Yes / NoAll volunteers must provide evidence that they have the right to work in the UK should they be appointed. Please refer to the guidance document regarding the documentary evidence required. |
| I certify that, to the best of my belief, the information I have provided is true. I understand that any false information or failure to disclose criminal convictions may result in the termination of volunteer working arrangements with South Gloucestershire Library Service.*Data Protection Act / General Data Protection Regulation (GDPR)*I hereby give my consent for personal information provided as part of this application to be held on computer or other relevant filing systems in accordance with the Data Protection Act / General Data Protection Regulation (GDPR).Signed by volunteer: Date: |
| **If you are under 18 please ask a parent or guardian to sign this form to say that they’re happy for you to volunteer with us.**Signed by parent / guardian : Date:Name: Relationship to volunteer: |
| **Emergency contact information of a close family member or friend**This information will be extremely important in the event of an accident or medical emergency when you are volunteering with the library service.Emergency contact name:Emergency contact phone number: |
| **Do you have a medical condition or allergy staff need to be aware of.** Yes / NoIf YES, please speak to the Librarian or Library Supervisor*Staff make note of the date of this conversation here:*Please note staff can not be responsible for administering medicine. |

**When you have completed this form, please return it to your local library.**

**All information provided in this application form will be treated in the strictest confidence.**

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| **FOR LIBRARY USE ONLY** | Date form returned to library: |
| Action required: | Yes/No | Date: | Any other information: |
| Proof of right to work completed  |  |  |  |
| References cleared  |  |  |  |
| DBS cleared (if applicable)  |  |  |  |

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