



Volunteer Application Form

Full Name:					
Phone Number:					
Email Address:					
Do you have any children at this school? (Please circle)	YES	NO			
<i>If you circled YES above, please fill below</i>					
Child(ren) Name and Class:					
Your availability: <i>Please circle all the times you are available</i>					
	Mon	Tues	Wed	Thurs	Fri
Preferred hours: <i>I.e. Full day, mornings only, afternoons only</i>					
Do you have a preferred age range you would like to volunteer with? <i>Please note that parent volunteers will be placed in a year group in which they do not have a child.</i>					
Early Years (Nursery and Reception)	Key Stage 1 (Years 1 & 2)	Lower Key Stage 2 (Years 3 & 4)	Upper Key Stage 2 (Years 5 & 6)	Don't mind	

Please hand write the answers to the following questions:

Why would you like to volunteer at Nelson Primary School? *Please include any skills or experience that you bring to the role, what is your motivation for wanting to work with children or young people and explain what you want to achieve from volunteering.*

Please give details of any education, training or courses you have successfully completed that may be relevant to support you in your role as a volunteer.

Please note, if your application is successful, you will have to undertake an interview.

Following a successful interview, we will require an enhanced DBS Disclosure for everyone who has regular and unsupervised contact with our pupils.