

Volunteer Rangers at High Lodge

This form is intended to give us additional information about your availability and interests. Please complete and return with your application.

1. **Name**.....

2. It is our preference that Volunteer Rangers work 1-4 days a week for a minimum of 6 months. How many days per week would you wish to be involved?

Please circle: 1 day 2 days 3 days 4 days more

3. Please tick all days/time when you would usually be available. Please note that peak times for us are weekends, Bank Holidays and School Holidays. Your availability may affect your chances of becoming a Volunteer Ranger

	morning	afternoon	evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Bank Holidays			
School Holidays			

4. Do you have your own transport? **Yes/No**

5. Are you willing to undergo a Criminal Records Bureau check? **Yes/No**

6. Please rank in order of interest (1 most – 6 least interested)

- Play
- Events
- Education
- Practical work
- Trails
- Cycling
- Walking
- Technical support
- Other, please specify

Thank you

Voluntary Ranger Welfare Information

The Forestry Commission is committed to providing a safe and healthy working environment for volunteers working under its management. Current legislation also places the responsibility on you, the volunteer as well as the Recreation Team to take all reasonable steps to make sure safe working practices are carried out. To enable you to contribute positively to your own and your colleagues' safety at work, and to ensure that we are meeting the needs of our volunteers we need some basic details.

All information will be treated in strictest confidence. If preferred this can be send in a sealed envelope marked Welfare Information.

Name and Address Mr/Mrs/Miss/Ms

Email

Telephone/mobile

Date of Birth

Emergency contact details

Name and address

Tel/Mobile

Relationship

Health Disclosure

To enable us to plan our First aid provision and ensure your welfare, please answer the following questions.

- Is there any work which you might find difficult for health reasons? If yes please describe.

- Are you taking any medication that a first aider or doctor would need to be aware of?

- Is there any other information we may need to ensure your safety? E.g. colour blindness, hearing impairment, learning difficulties, epilepsy, allergies.

- When working outdoors it is advisable to have protection against Tetanus. **Please tick which of the following apply to you**
 - I have received an inoculation which is still valid
 - I do not have a current valid tetanus inoculation, but I will obtain one

Volunteer Declaration *Data Protection Act 1998. The personal data on this form will be used by the Forestry Commission Recreation Team only.*

"I am involving myself of my own free will and declare that to the best of my knowledge the information given above is correct and I know no reasons why I should not participate. I consent to the personal details supplied on this form being used by the Forestry Commission".

Name.....

Signed.....

Date.....

Nationality, Ethnicity and Minority Information

Nationality		
British or British Mixed	English	Irish
Scottish	Welsh	Other (please specify)

Ethnic Groups			
<u>Asian/Asian British</u>			
Bangladeshi	Indian	Pakistani	Other
<u>Black/Black British</u>			
African	Caribbean	Other	
<u>Chinese/ Chinese British</u>			
Chinese	Other		
<u>Mixed ethnic background</u>			
Asian/ White	Black African/ White	Black White	Caribbean/ Other
<u>White</u>			
White British	White European	Other	
<u>Any other ethnic background</u>			
Specify if you wish			

All information on this form will be treated with the strictest confidence. If preferred this form can be sent with the Welfare information form in a marked sealed envelope. If sending forms by post please send to Frances Evershed, Volunteer Manager, Forestry Commission East of England, Santon Downham, Brandon, Suffolk. IP27 0TJ

Thank You