



## Volunteer Application

Please refer to “Becoming a CAB Volunteer” document before completing this application form.

<b>Name</b>	
<b>Address</b>	
<b>Mobile</b>	
<b>Email</b>	

Please tick which area you would like to volunteer in:

<b>Generalist Advisor</b>	<b>Receptionist</b>	<b>Administration</b>	<b>IT / Technology</b>

Please indicate when you are available to volunteer (minimum 6 hours per week):

<b>Day</b>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>AM</b>					
<b>PM</b>					

Please tick which Bureau you wish to volunteer at:

<b>Inverness (Union Street)</b>	<b>Raigmore Hospital</b>	<b>Aviemore</b>

Please describe anything you require to enable your participation in an interview or if we offer you a volunteering role.



## Data Protection Act 1998

As part of the recruitment procedure, we may collect and store sensitive personal data about you. We are required by law to obtain your consent to such data being recorded. It is our policy to store data relating to recruitment procedures for up to 3 months after the date on which it is submitted. Any information of this nature will be treated confidentially.

Sensitive personal data is defined as information relating to any of the following: racial or ethnic origin, political opinions, religious beliefs, trade union membership, health, sexuality or sex life, offences and/or convictions.

## Volunteers who wish to train as General Advisers:

Have you ever committed an offence under section 25 and 26 (1) (d) or (g) of the immigration act 1971? (These offences concern assisting illegal entry, falsifying documentation or obstructing the authorities investigating immigration offences. If you have committed one of the offences above you may still be able to be an advisor: however, we would have to contact the Office of Immigration Services Commissioner to discuss the issue.)

Tick	
Yes:	<input type="checkbox"/>
No:	<input type="checkbox"/>

**If you have any questions before signing and submitting this application, please get in touch.**

For the purposes of the Act the Data Controller is Inverness, Badenoch & Strathspey CAB.

I declare the information given on this form is correct to the best of my knowledge and acknowledge that by signing this form I have given my consent to sensitive personal information being recorded and stored.

<b>Signed</b>	
<b>Date</b>	

**Please email to [Volunteer@InvernessCAB.org](mailto:Volunteer@InvernessCAB.org) or drop off at the Union Street Bureau.**