



# Volunteering Application Form

## OFFICE USE ONLY

Form ref:	
Date received:	

Service / Staff number:	Rank:
Forename:	Surname:
Unit Address:	
Postcode:	

## PERSONAL DETAILS

Military Telephone:	Civilian Telephone:	
Mobile:	Email:	
T-Shirt size:	Preferred name:	
Are you CRB checked?	CRB number:	CRB expiry date:
Which camp are you volunteering for?	1st choice:	2nd choice:
Would you be prepared to drive a minibus? YES / NO		
If you answered yes to driving a minibus please attach a photocopy of both parts of your driving licence to this application form.		

## BACKGROUND AND MILITARY EXPERIENCE

**PLEASE GIVE REASONS WHY YOU WISH TO WORK WITH BEREAVED CHILDREN & FAMILIES**

**HAVE YOU EXPERIENCED ANY MAJOR LOSS?**

(e.g divorce, major illness, death of a colleague, relative or friend) Please describe and give dates.

**ANY RELEVANT TRAINING OR EXPERIENCE**

Signature:	Date:
------------	-------