



Volunteering Application Form

Forename:	Surname:
Permanent Address:	Email address:
	Contact number:
	Date of Birth:
Postcode:	
Emergency Contact 1 (name and relation):	Emergency contact 1 number/s:
Emergency Contact 2 (name and relation):	Emergency contact 2 number/s:
What day/s are you applying for? (days available are specified in the advert)	
Are you able to commit to one day a week for the duration of placement? (Please let us know if you have any prebooked holidays below) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have any additional learning requirements and is there any additional support you may need on placement. If you have answered yes please give further details below <input type="checkbox"/> Yes <input type="checkbox"/> No Please state:	



Do you have any medical conditions, and are you on any form of medication that we need to know about? ☐ Yes ☐ No

Please State:

Have you had your tetanus jab? ☐ Yes ☐ No

Have you ever been convicted of a criminal offence? ☐ Yes ☐ No

If yes, please give details below:

Relevant Experience and related skills:

Interests and Hobbies

Please tell us why you would like a placement at Noah's Ark Zoo Farm:

Are you or have you ever been a member of (or had any close associations with) a zoo, rescue centre, animal rights or welfare group, charity, community or church organisation? ☐ Yes ☐ No

If so, please state which one/s:



When and how long were you a member?

Any further comments:

Applicants Declaration:

I declare that the information included in this application form is correct.

Print Name:

Signed:

Date:

Referee Declaration: Please provide the details of a professional person that has known you for over 2 years (school/college teacher or colleague).

Name of Referee:

Tel no:

Email address: