

# Volunteer Application

## Seaford Museum and Historical Society

Thank you for your interest in volunteering with Seaford Museum. Please complete this form and return it to the museum at the address given on the last page, or email it to Volunteer Coordinator at [volunteer@seafordmuseum.co.uk](mailto:volunteer@seafordmuseum.co.uk)

Volunteer positions are normally for adults aged 18 or over who are, or become, members of Seaford Museum and Heritage Society. Please contact us on [volunteer@seafordmuseum.co.uk](mailto:volunteer@seafordmuseum.co.uk) for further details if you are under 18 and looking for work experience.

Please print your answers.

### Your details

Title (Mr/Mrs/Miss/Ms/Dr/Other)	
First name(s)	
Surname	
Current occupation	
Date of birth	
Home address	
Email address	
Home telephone number	
Mobile telephone number	
Preferred contact method	

### The role

Which volunteer role, or roles, are you expressing interest in?

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### About you

Please provide a brief outline of any particular skills, interests or experience that you would like to bring to your volunteer role. (Continue onto another sheet if required.)

### Availability

Please provide details on your general availability to volunteer at the museum. We won't hold you to these dates or times, but it is useful for us to know if you're generally available on specific days and at what times. Some volunteer roles require more specific timings than others. Stewarding sessions run from 11 – 13.30 and 13.30 – 16.00 Saturdays, Sundays and all bank holidays apart from Christmas Day and 14.00- 16.00 on Wednesdays. Other volunteers take part in working sessions from 9.30 – 12.00 on Tuesdays and/or Thursdays

### Special Requirements

If you require any special arrangements to be made for you to attend an initial induction meeting or if you have any medical conditions we should take into consideration, please specify those here. This information is requested so that we may care for your needs and will be kept confidential.

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### Emergency Contact Details

Please give details for the person we should contact in case of emergency.

Name (Please print)
Relationship
Emergency contact number

### Photo ID

If you are accepted for a position as a volunteer you will need to show us photo ID (passport, bus pass or driving licence) and proof of address such as your current year's Council Tax bill. Bank statements are not proof of address.

Do you have any criminal convictions that are not 'spent'?    Yes            No  
If so we will contact you confidentially about it.

### Referee

Please give contact details of someone (other than relatives or partners) who have known you for more than 2 years who we can contact to comment on your suitability to volunteer for us.

Name	
Relationship to you/how you know this person	
Address	
Email Address	
Phone (landline)	
Phone (mobile)	

Your personal information provided on this form will be kept in accordance with the Data Protection Act 2018. Your information will be held securely and confidentially and accessed only by authorised persons. Anonymised aspects of the information given by you may be used for statistical purposes.

## **Volunteer Application**

### **Seaford Museum and Historical Society**

I am over 18 years old and I declare that the information I have provided is true.

**Signed**

**Date**

**(If you are returning a digital copy, we will ask you to sign this when we see you.)**

Please return to [volunteer@seafordmuseum.co.uk](mailto:volunteer@seafordmuseum.co.uk)  
or post to

Volunteer Coordinator  
Seaford Museum and Heritage Society  
P.O.Box 2132  
The Esplanade  
Seaford  
East Sussex  
BN25 9BH

or drop off at the museum

Volunteer Coordinator  
Seaford Museum and Heritage Society  
Martello Tower 74  
The Esplanade  
Seaford  
East Sussex  
BN25 1JH