

Hospital Broadcasting Service Suite 444 Baltic Chambers 50 Wellington Street Glasgow G2 6HJ Tel: 0141 221 4043

www.hbs.org.uk

Volunteer Enquiry Form

Fields in red are mandatory

Any information given on this form is confidential and covered by the Data Protection Act 1998

Name	Title Mr/Mrs/Miss/I	Title Mr/Mrs/Miss/Ms/etc.		
Telephone	Mobile	Mobile		
E-Mail				
Select Gender	Select Age Range (Select Age Range (min age 16)		
Male Female	16 - 25 2	6 - 35 36 - 45		
	46 - 54 5	5 - 64 over 65		
Your Address Details House / Street				
Tiouse / Street	Town/City			
	Region			
	Post Code			
Where did you hear about volu	nteering for the Hospital Broadc	asting Service?		

Your skills and interests (please tick all which apply)	Roles which may interest you (please refer to Volunteer Information Pack for details)
Admin / Clerical	Supervisor (Team Leader)
Computer Skills	Music Librarian
Fund Raising	Editing
Telephone Skills	Fund Raising
Information Technology	Request Collecting
Audio Production	Presenting
Audio Editing	Audio Engineering

Other - Please Specify

Any previous experience as a Volunteer?
Relevant Work Experience
Courses or Training (if relevant)
Hobbies and Interests
Why would you like to be a volunteer with HBS?
Do you have any Criminal Convictions (other than minor driving offences)? Yes No
If yes, please state date and nature of conviction
What would you like to achieve through your voluntary work at the organisation?
What qualities do you feel you would bring to HBS?
Do you have any Support Noods? Diseas specific
Do you have any Support Needs? Please specify

Your Availability: Please tick all that apply	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Please provide contact details for two **independent** referees who would be willing to supply a character reference (**they must not be family members**)

Referee 1.	Referee 2.
Name	Name
How does this person know you?	How does this person know you?
Address	Address
Tel. no.	Tel. no.
E-Mail Address	E-Mail Address

Thank you for your interest in The Hospital Broadcasting Service.

Please note that to comply with NHS rules we need to receive two satisfactory references before you can undertake many of the volunteering roles and we cannot always guarantee a suitable role to be available at the time you apply.

Please read the information on the next (final) page and ensure you tick the agreement box confirming you have read and understood the details.



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Our Vision

Our aim is to provide the highest possible quality of therapeutic radio service to patients in the hospitals which we serve.

Our Purpose and Mission

- Ensure that at all times we meet the needs of the listener, this being the focus for all our activities.
- Maintain the use of professional standards and practices in the management and operation of the Service.
- Undertake training programmes to develop the potential of the membership in areas appropriate to the needs of the Service.
- Promote through external communications, an image which is in keeping with the professional standards of the Service.
- Maintain regular dialogue with appropriate personnel in the hospitals served.
- Maintain ongoing contact with patients through a regular program of visiting in all the hospitals served.
- Undertake a range of promotional and fundraising activities to maintain the public profile and financial viability of the Service.
- Provide qualitative targets and measures to support the quality ethos of the Service and the quest for investment in the Service.

I agree to support the Vision, Purpose and Mission of HBS

Please tick this box to confirm you agree