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| **ORIEL DAVIES GALLERY**  A picture containing graphical user interface  Description automatically generated  **VOLUNTEER APPLICATION FORM** |
| Date of Application |
| Name      Address |
| Telephone number    Email |
| Are you employed/ unemployed/ retired/ a student? Please provide any relevant information. |
| Why do you wish to volunteer with Oriel Davies Gallery? |
| When might you be available to volunteer? (This is just to give us a rough idea and we will not hold you to these times!) How many hours would you like to volunteer per week?     |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | | 12 -2 | 12 -2 | 12 -2 | 12 -2 | 12 -2 | 12 -2 | | 2-4 | 2-4 | 2-4 | 2-4 | 2-4 | 2-4 | |
|  |
| When would you be available to begin volunteering? Please add any other information about relevant dates |
| Do you have any relevant skills, knowledge or previous experience that you think might be useful for this role?        Do you have any health considerations relevant to volunteering? |
| Please tick box to confirm consent for the information to be held by Oriel Davies Gallery in line with government GDPR regulations |



Thank you for completing this form.

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