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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   |

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|  |
| 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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