

Volunteer Application Form

PERSONAL DETAILS

First name		Last name	
Preferred name		Home phone	
Email address		Mobile phone	
Address		Alternative phone	
		Date of birth	

SKILLS, STRENGTHS AND INTERESTS

Current or past occupation(s)	
Are you currently a volunteer at another organisation?	<input type="radio"/> No <input type="radio"/> Yes. If so please provide details
Relevant qualifications / training	
Relevant skills and experience	

I WOULD BE INTERESTED IN VOLUNTEERING FOR TASKS RELATED TO (PLEASE TICK ALL THAT ARE RELEVANT)

Administration	<input type="radio"/>	Public education	<input type="radio"/>
Care of others	<input type="radio"/>	Coordinating other volunteers	<input type="radio"/>
Logistics and organising	<input type="radio"/>	Catering	<input type="radio"/>
Technical (please specify below)	<input type="radio"/>	Other (please specify below)	<input type="radio"/>

AVAILABILITY

I would prefer to volunteer in the following locations (tick all that are relevant)

New Plymouth Hawera Stratford In my local community Anywhere

I prefer to volunteer During civil defence events Outside of event time (e.g. stalls, provide education)

I prefer to volunteer during (tick all that are relevant)

Week days Evenings Overnight Weekends

I prefer to attend training on (tick all that are relevant)

Week days Evenings Weekends

Do you have access to reliable transportation that would enable you to volunteer during an event? No Yes

Declaration (please tick and provide details if necessary)

I have an illness or disability that may prevent me from performing some tasks. If yes, please attach details.	<input type="radio"/> No	<input type="radio"/> Yes
I am aware that Taranaki CDEM Group may require a police vetting check of myself dependant on my volunteering role (a separate form will be provided to you if required).	<input type="radio"/> No	<input type="radio"/> Yes
I am aware that photos of me may be taken during training and events and that these may be circulated through social media and other publications.	<input type="radio"/> No	<input type="radio"/> Yes

Volunteer signature		Date	
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Return form to:
 Taranaki Civil Defence Emergency Management
 Email: emo@cdemtaranaki.govt.nz
 45 Robe Street, New Plymouth
 Phone: 06 758 1110

