

Volunteer Application Form



We ask all our volunteers to complete this application form. It asks for your basic contact details and some background information on what you'd like to gain from volunteering with us.

Please email your completed form to recruitment@aclfc.com

Personal Details

Preferred Title	
First Name	
Surname	
Address	
Mobile No.	
Email	

Volunteer Role

Please provide information below about the volunteer role you are applying for and why you want to volunteer with Aberdeen City Ladies FC.

Role applying for (enter team name if relevant)	
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Have you volunteered before? Organisation? Role?

Other skills/interests that may be of use? e.g. – other, coaching experience, football, languages spoken

Where did you find out about our volunteer opportunity?

Do you have any current links to ACLFC?

Availability

When would you be able to volunteer with us? Please provide the times you are available.

Certain volunteering opportunities are dictated by scheduled events and are subject to a successful PVG check. The role descriptions may mention a minimum commitment per week; we therefore ask that you commit to volunteer with us for a minimum of 6 months due to the resources involving inducting and training new volunteers.

	Monday	Tuesday	Wednesday	Thursday	Friday
AM					
PM					
Although matches are generally at the weekends We may have additional club events on a Saturday or Sunday. Would you be willing to volunteer at these additional events?					

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Supporting Information

Please provide us with the names of two people to provide a reference. The SWF Appointment and Selection procedure requires that the Club receives 2 satisfactory references for applicants to roles within the Club.

Referees must be over the age of 18 and must not be related to you. These can be previous employers, college or university tutors, personal acquaintances or anyone else who can comment on your suitability for the volunteer role, however you cannot have an official of Aberdeen City Ladies FC provide a reference.

Referees should have known you for at least two years.

First Referee	
Full Name	
Address	
Telephone	
Email	
How do you know this person?	

Second Referee	
Full Name	
Address	
Telephone	
Email	
How do you know this person?	

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Declarations

Disclosure Service	<i>As your role may involve you working with Protected Adults and/or Children we may require you to complete a disclosure.</i>	
	Are you willing to undertake a PVG check where necessary?	Yes / No

I declare that the information in this application form is correct to the best of my knowledge and acknowledge that by signing this form I give my consent to sensitive personal information being recorded and stored securely by Aberdeen City Ladies FC, in accordance with their data protection policy.

Signed	
Date	

Electronic signature/written signatures are both accepted.

Thank you for completing this form and your interest in volunteering with Aberdeen City Ladies FC

Please return this form to recruitment@aclfc.com

We will be in touch soon.