



# COLCHESTER EMERGENCY NIGHT SHELTER

*Accommodation, advice and practical help for homeless men and women aged  
18 or over*

39-41 Alexandra Road, Colchester, Essex CO3 3DF

Telephone: 01206 549885

Website: [www.colchesternightshelter.org.uk](http://www.colchesternightshelter.org.uk)

Email: [enquiries@colchesternightshelter.org.uk](mailto:enquiries@colchesternightshelter.org.uk)

## Volunteer Application Form

(PLEASE COMPLETE IN BLOCK CAPITALS)

Full Name  
Incl title:

Permanent  
Address:

Telephone:  Date of Birth:

Occupation:

Email address:

Please indicate below how often you think you will be able to help and which days of the week you are available (e.g. which evenings of the week including Saturday and Sunday afternoons)

What attracts you to this type of voluntary work? (Continue overleaf if necessary)

Please give the names and addresses of two people who know you well (but are not related) who would be willing to give you a reference.

A.

B.

Do you have criminal offences recorded against you? If so, please give details below. Because we work with vulnerable adults volunteer posts are exempt from the Rehabilitation of Offenders Act 1974 – so you must declare all spent and unspent convictions. Please note that regular volunteers will be required to obtain an Enhanced Disclosure from the Criminal Records Bureau of which the project will cover the costs.

Signed:

Date: