Leicester Rape Crisis at **Jasmine House**

. Business Line 0116 255 5962 Help-line 0116 255 8852

VOLUNTEER APPLICATION FORM

Please complete all sections of the application form and return to
Email : admin@jasminehouse.org.uk Post: please contact office

Personal Details	
Name:	Date of Birth:
Address:	
Home Telephone Number:	
Mobile Telephone Number:	
Work Telephone Number:	
Email Address:	
Next of Kin Details	
Name:	Relationship to you:
Contact Number:	

Role - What type of a role are you interested in?			
Helpline ☐	Admin ☐	Support Work ☐	Counselling ☐

Availability – Please state the days and times you are able to volunteer at Jasmine House Leicester Rape Crisis			
Monday:	Morning ☐	Afternoon ☐	
Tuesday:	Morning ☐	Afternoon ☐	
Wednesday:	Morning ☐	Afternoon ☐	Evening ☐
Thursday:	Morning ☐	Afternoon ☐	Evening ☐
Friday:	Morning ☐	Afternoon ☐	

Languages – What languages do you speak?

Counselling Placement (Please complete, if you wish to undertake a counselling placement at Jasmine House) Please NOTE there is a separate selection process for all placements.
What previous counselling courses have you completed?
What counselling course are you currently undertaking and at what level?
At which institution are you undertaking this course?
If you are undertaking the counselling diploma which year are you currently in?

Why do you want to volunteer at Jasmine House, Leicester Rape Crisis?

Could you briefly explain any relevant experience you may have (paid/unpaid)

Where did you see / hear about Jasmine House Leicester Rape Crisis

Reference 1
Name:
Referee's Position:
Relationship to you:
Organisation / Company Name:
Address:
Telephone Number:
Email Address:

Reference 2
Name:
Referee's Position:
Relationship to you:
Organisation / Company Name:
Address:
Telephone Number:
Email Address: