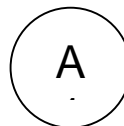




ST ELIZABETH'S CHARITY SHOPS VOLUNTEER REGISTRATION FORM



Shop Name: _____

1	Volunteer Name: Mr/Mrs/Ms _____ Address: _____ _____ Post Code: _____ Tel No: _____ Email: _____ D.O.B _____
2	Emergency contact information: Volunteers Emergency Contact (Name): _____ Contact telephone detail(s): Mobile: _____ Home: _____ Work: _____
3	Health & Safety: Volunteers play an important role in being responsible for their health and safety as well as that of other volunteers, staff and customers. A copy of the Your Safety Matters booklet will be given to you as a volunteer, where you will be asked to read and sign a form to ensure you fully understand the importance of maintaining good health and safety practices in a charity shop environment.
4	St Elizabeth's values the time given by volunteers: As a volunteer, you must log in and out each session using Cybertill. This helps keep track of the time given by you. This record also acts as a register in the event of an emergency.
5	References: Reference 1: Name: Mr/Mrs/Ms _____ Address: _____ _____ Post Code: _____ Tel No: _____ Email: _____ Reference 2: Name: Mr/Mrs/Ms _____ Address: _____ _____ Post Code: _____ Tel No: _____ Email: _____

Please tell us when you are available (✓ all relevant box(es)):

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

Listed below are regular tasks and activities which our volunteers are asked to undertake. Please read through each item carefully and tick the relevant box(es).

Please can you tell us whether you are able or unable to undertake the following tasks	✓	✓
	Not Able	Able
Walking up or down stairs		
Walking up or down stairs carrying donations		
Steaming clothes (sit and/or stand)		
Labelling clothes and other items (sit and/or stand)		
Sorting clothes (sit and/or stand)		
Preparing window displays		
Preparing other displays around the shop (involves carrying items to point of sale and displaying)		
General tidying of shop		
Washing and drying bric à brac (sitting and/or standing)		
General lifting		
General carrying		
Working on the till (sitting and/or standing)		
Cleaning (dusting shelves, steaming floors, cleaning and tidying kitchen area, cleaning toilet areas etc)		
If you have any health conditions, allergies or other requirements that we should be aware of, please let us know in the space provided below:		
<p>Volunteer Pregnancy: Whilst you are volunteering with us, if you become pregnant please ensure you have told your Shop Manager, so they can adhere to proper health and safety regulations while you are at work.</p> <p>If you are currently pregnant, please disclose the following information: Due date: Planned leaving date: Are you planning to return as a volunteer? YES NO</p>		

Signed: _____

Date: _____

Please return via post or email to: angela.fordrey@stelizabeths.org.uk or Angela Fordrey, St Elizabeth's Centre, South End, Much Hadham, SG10 6EW



ST ELIZABETH'S CHARITY SHOPS VOLUNTEER CHARTER

Everyone who works at St Elizabeth's is responsible for:

- Acting consistently with the Centre's mission, values and ethos
- Treating others with courtesy and respect, valuing diversity and difference
- Acting in the interests of, and being an ambassador for, the organisation
- Safeguarding and promoting the welfare of adults and children
- Safeguarding the health, safety and welfare of self and others, including vulnerable adults and children
- Complying with accountabilities, rules, policies and professional boundaries
- Maintaining confidentiality and declaring any potential duality/conflict of interest
- Contributing to effective performance and service delivery
- Owning individual responsibilities and sharing team objectives
- Working with professionalism, integrity, cooperation and collaboration
- Keeping skills and knowledge up to date
- Raising any serious concerns with managers promptly

Everyone who works at St Elizabeth's can expect:

- To be treated politely with respect and courtesy by other staff
- An effective corporate and local induction, and a probationary period
- Clear, agreed objectives for your job set within a clear team plan showing how your role fits in with team, service and Centre objectives
- The necessary resources and line management support
- Appreciation of your efforts, contribution and achievements
- Zero tolerance of discrimination, bullying and harassment

VALUES: Staff are expected to embrace an organisational ethos that:

- Respects the rights and dignity of everyone regardless of their circumstances, recognising their uniqueness, their individual aspirations and needs
- Provides learning and development opportunities to enhance informed choice, empowerment and independence for personal decision making by pupils, learners and residents
- Develops and expects professionalism, integrity and excellence in employees, working as a team
- Promotes equal opportunities and social inclusion, celebrates diversity and challenges inequality
- Involves and is open and accountable to those with an interest in its service including pupils, students, learners, residents, relatives, carers, commissioners and regulators
- Is outward looking, flexible and progressive; a learning organisation collaborating in partnership with other agencies and professionals to provide responsive and continuous improvement in its services
- Volunteers found to be stealing property from the premises will either at the discretion of management be prosecuted or asked to leave the premises and be banned from all the organisations premises.

Volunteer: I confirm that I read and understand the expectations of St Elizabeth's.

Print Name: _____ Signature: _____ Date: _____

VOLUNTEER REFERENCE FORM

PRIVATE AND CONFIDENTIAL



Name of volunteer:

What is your relationship with volunteer:

- Employer
- Minister
- Friend
- Other (Specify)

How long have you known the volunteer?

With your knowledge and experience of the volunteer, please comment on his/her suitability to work with us. Please include comments about his/her honesty, reliability, health, ability to work in a team, general attitude and experience. Appropriate training is given to all applicants.

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Are there any other comments you would like to make about the volunteer?

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Name: **Signed:**

Date:



Health and Safety Validation Questions

You must have had your shop induction and have must read and understand your safety matters booklet before answering the following questionnaire.

Fire Safety

1. Fire Extinguishers
 - a. Have you been shown the location of the fire extinguisher? Yes/No
 - b. Have you been shown how to use the fire extinguisher? Yes/No
 - c. Do you know how to use a fire extinguisher? Yes/No
2. Fire alarms
 - a. Have you been shown where the fire alarms are located? Yes/No
 - b. Have you been shown how to raise the alarm? Yes/No
3. Fire exits
 - a. Have you been shown where the fire exits are located? Yes/No
 - b. Where is the fire assembly point?

4. Name three safety rules for exits and passages:
 - a. _____
 - b. _____
 - c. _____

First Aid

1. Have you been shown the first aid box and its permanent location? Yes/No
2. Who are your appointed first aiders?
1. _____ 2. _____
3. Have you been shown the accident book? Yes/No

General Safety

1. Have you been shown the risk assessments? Yes/No
2. When using electrical equipment in store name 3 rules you should follow.
 - a. _____
 - b. _____
 - c. _____

3. When lifting heavy bags name 3 things you do?

a. _____

b. _____

c. _____

4. Do you know how to recognise hazardous material? Yes/No

5. Do you know where the sharps bin is, and it's use? Yes/No

Volunteer: I confirm that I have read and understood the Your Safety Matters Booklet

Print Name: _____ Signature: _____ Date: _____

Manager: I confirm that this volunteer has read and understood the Your Safety Matters Booklet

Print Name: _____ Signature: _____ Date: _____



Volunteer Induction Checklist

Volunteer Name: _____

Registration Form	
Interview	
Photo ID	
References	
Shop Familiarisation & Health and Safety Tour	
Your Safety Matters Booklet	
Health and Safety Questions	
Fire Training Entered into Fire Log Book	
Risk Assessments (If Required)	
Volunteer Charter	
Shop Purchasing Policy	
Steamer Training Logged in Health and Safety File	
Duplicate Application Sent to Office	

Managers Name: _____ Signature: _____ Date: _____



Volunteering with St Elizabeth's

Mentoring / Supervision Form

Attendees

Volunteer's name: _____

Managers name: _____

Meeting date and time: _____

Volunteer Questions (record discussion in relevant box/separate sheet of paper if necessary)

1. Summarise the tasks the volunteer has undertaken, and the progress the volunteer has made supporting the running of the shop.
2. Discuss any issues.
3. Discuss and agree any future tasks.

Managers Signature: _____

Volunteers Signature: _____