

Volunteer Application Form

We ask for personal details and interests to help us match you with the right volunteer role, ensure we can contact you, and create a diverse and engaging experience at the station. Your information will help us find the best fit for both you and the station.

1. About You

Surname					
Garriarrio					
First Name					
Address					
			Postcode		
			1 0010000		
Telephone Nเ	umber				
Email Addres	s				
D ((D) (I					
Date of Birth (if under 18)*					
* we cannot accept volunteers under the age of 16					
How did you find out about volunteering opportunities with Bolton FM?					
Examples: Website, Social Media					

2. Areas of Interest

Bolton FM offers a variety of volunteer roles, some of which are shown below. We offer training for all applicants, so no prior experience is required. However, presenters must complete training before going on air.

Please select all the areas which are of interest to you

☐ Presenting	☐ Producer	☐ Journalist				
■ News Reading	☐ Outside Broa	adcasting				
Live Events	☐ Studio Desk Driver	☐ Receptionist/Admin				
☐ Marketing/PR ☐ Fundraising ☐ Social Media Management						
☐ Photography	☐ Videography	☐ Website Development				
☐ Graphic Desig	n 🔲 IT Support	☐ Sound Engineering				
☐ Software Development ☐ Electronics Repairs and Servicing						
		nteer work for Bolton FM and				

4. Personal Circumstances

Please select which best describes your employment status

Full Time EmployedFull Time StudentAt School	Part Time EmployedPart Time StudentRetired
years. This could include childcar	nings you have been doing over the last 3 re, school/college/university, employment or e question as fully as possible with specific

5. Disabilities

To help us offer you appropriate support in your volunteer role, please advise us (in strict confidence), of any health issues, disabilities or any other circumstances that might affect the type of voluntary work you are able to do.					
6. References					
Please give details of two referees* who have known you for at least 2 years					
and who are happy to give you a reference.					
Name	Name				
Phone	Phone .				
Email	Email				
In what capacity do they know you?					

^{*} Will will not contact referees without notifying you first.

6. Data Protection

The information you have supplied in this form is confidential. It will be held and processed in accordance with the General Data Protection Regulation (GDPR) and Data Protection Act 2018, we will share the information with any third party unless you expressly allow us to do so. We may from time to time use the information we collect to contact you for operational purposes and in the day to running of Bolton FM.

7. Additional Information Please use this section to include any additional information in support of your application 8. Declaration

I confirm that all the information supplied in this application form is true and

accurate.

Signed*

Date

Please note that Bolton FM have a probationary period of 4 weeks before we will take you on permanently, this is to assess you in the role you have applied for.

Thank you for completing this application form. We will be in touch shortly.

^{*}make your mark or simply enter you name

Please return this form to: volunteer@boltonfm.com						
Hand written copies may be dro	be dropped off at our offices (or posted) Bolton FM, Office 6 Ashburner Street Bolton BL1 1TQ					
FOR OFFICE USE ONLY (DO NOT FILL THIS SECTION	IN)					
Date and Time of Contact						
Date and Time of first Visit						
References Checked						
Notes						