



Volunteer Information

Date Received:

PERSONAL INFORMATION

Surname	First Name
D.O.B	
Address	
Post Code	
Telephone Numbers: Home	Mobile
Email Address:	
Cardiff & Vale Credit Union Membership Number:	

BRIEF DETAILS OF ANY PREVIOUS WORK OR VOLUNTEERING EXPERIENCES

Name of Organisation	Tell us briefly what sort of work you did	Year

ABOUT YOU

Please tell us why you would like to volunteer for Cardiff & Vale Credit Union and what areas of work you are interested in. Describe any skills or experience you have in these areas

Please provide two people who we can contact who will be willing to provide a reference for you.

Name of referee:	Name of referee:
Telephone No.	Telephone No.
Email address	Email address
How do you know this person?	How do you know this person?

Please indicate preferred times you are available to volunteer				Are there any particular periods when you would not be available to volunteer. If so please give details: (e.g. holidays)
	Morning	Afternoon	Evening	
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Thank you for completing this form. By signing this form, you are agreeing to be contacted by Cardiff & Vale Credit Union for volunteering opportunities.

Signed		Date:	
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Please return this form to: Cardiff & Vale Credit Union, Advice Hub, 1st Floor, Marland House, Central Square, Cardiff, CF10 1EP
Tel: 029 2087 2373
Email: ccu@cardiffcu.com Website: www.cardiffcu.com