**Volunteer Expression of Interest Form**

**Please send your application to HR:** [**humanresources@leedsheritagetheatres.com**](mailto:humanresources@leedsheritagetheatres.com)

**Personal information**

|  |  |
| --- | --- |
| **Name:** |  |
| **Address:** |  |
| **Telephone:** |  |
| **Mobile:** |  |
| **Email:** |  |

**The position you’re applying for**

Volunteer at Leeds Grand Theatre

Volunteer at City Varieties Music Hall

**When are you available to volunteer?**

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| --- |
| Your availability (please tick as appropriate)  **Mon**  **am pm**  🞎🞎  **Wed**  **am pm**  🞎🞎  **Fri**  **am pm**  🞎🞎  **Thurs**  **am pm**  🞎🞎  **Tue**  **am pm**  🞎🞎  **Flexible**  🞎  **Weekends**  🞎 |

**More about you**

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| --- |
| Use this section to tell us about you and your interests and/or hobbies. |
| Use this section to tell us about any relevant experience, skills or qualities you have that would benefit the role. Feel free to mention any places you have volunteered or worked. |
| Use this section to tell us why you would like to volunteer at Leeds Grand Theatre or City Varieties Music Hall and what you hope to gain from the role. |
| We aim to create a positive environment that enables all volunteers to realise their full potential and welcome applications from a wide range of abilities. So we can consider any reasonable adjustments and better support you in your role, please give details of any disabilities or health issues that may impact your role (e.g. bad back). |

**References**

I understand and agree that, if successful in my application, Leeds Heritage Theatres will ask for two references to contact. I will also be asked to complete a Disclosure Declaration form.

Please tick box to confirm 🞏

**Data Protection**

Data Protection Act: I understand and agree that, as part of volunteering with LHT my details may be held in a confidential database that is only used for reasons relating to my volunteering.

Please tick box to confirm 🞏

**Guidelines for Volunteer selection**

Our volunteer selection processes are carried out in a way that ensures that individuals are selected purely based on their ability to do the role in which they are interested. No volunteer will receive less favourable treatment on the grounds of a protected characteristic or be disadvantaged by conditions or requirements which are not justified or relevant to the role. The sole criterion for selection is the suitability of the applicant for the role. We are committed to ensuring that every applicant applying for a volunteer role within LHT is treated fairly.

**Statement to be Signed by Applicant**

Please complete the following declaration and sign in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

I confirm that I am over the age of 18 🞏

I confirm that all the information given by me on this form is correct and accurate and I understand that if any of the information I have provided is later found to be false or misleading or if anything has been omitted, any offer to volunteer may be withdrawn.

|  |  |
| --- | --- |
| **Signed:** | **Date:** |

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