

MV Registration Form

Section 1 - Volunteer Details			
Surname			
First name(s)			
Address	Postcode		
Date of Birth:		Contact Tel No:	
Email:			
Employment status		Ethnic group	
If school pupil, please name school			
Section 2 - Volunteering Placement Details			
Organisation			
Volunteer Role			
Date started		Volunteer Supervisor	
		Telephone No:	
If you volunteer with more than one organisation please tick box and note details of each organisation overleaf			<input type="checkbox"/>
Have you volunteered before?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, are you claiming retrospective hours?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
How many hours completed? _____ hours. Attach Timesheet(s) as proof			
Section 3 - Volunteer Permission			
I agree to my details being passed to Volunteering Highland for registration of the MV Award.			
Please tick box and sign below <input type="checkbox"/> Yes <input type="checkbox"/> No			
Signature of Volunteer _____		Date _____	
Office use only			
Date registration form received _____			
MV No: _____		Input by _____	

Registration Forms for Inverness and Ross-shire should be returned to:
Volunteering Highland, 1a Millburn Road, Inverness IV2 3PX