

Name:

Address:

Mobile no.

Home telephone no.

E-mail address:

2. Volunteer role(s) you are interested in: (please tick)

- **Drop-in support** (Tuesdays, 4 hours, 12.30-4.30pm)
- **Drop-in support** (Thursdays, 4 hours, 12.30-4.30pm)
- **Run a craft activity** at one/both drop-ins (days & hours as above)
- **New members Drop-in** (1st and 3rd Monday each month, 2.5 hours, 1.30-4pm)
- **Meet & greet** (various mornings, afternoons or early evenings)
- **Course facilitator** (various mornings, afternoons or evenings)
- **Administration/office** (Wednesdays, 4 hours 1-5pm)
- **Data collection & Statistics** (flexible days, minimum 4 hours per week)
- **Blue Butterflies fund-raising group** (meet 1st Thursday each month, 4 hours, 5-9pm, involves some weekends)
- **Media & Publicity** (days & times variable)
- **Saturday shared lunch** (1st Saturday every month, 4 hours, 12-4pm)
- **Poetry Lunch** (last Saturday every 2nd month)
- **Drama group support** (Fridays, 3 hours, 12-3pm)
- **Gardening group** (Tuesdays, mid-May - mid-Oct, 3 hours, 1.30-4.30pm)
- **Singing group** (Wednesdays, 2.5 hours, 5.30-8pm)

3. Please tell us why you'd like to volunteer at Kyra

Take some time to read through the following statements and think about why you'd like to volunteer at Kyra. Tick any statements you feel apply to you; this will really help us to help you in getting the most out of your volunteering experience with us.

All statements below are perfectly valid reasons people may have for wanting to volunteer; none are better than others and you might have other reasons we haven't thought of.

- to use my experience or skills in a productive way
- to meet new people or make new friends
- to help others
- to gain experience to help me find a new job
- to feel like I'm making a difference
- to explore a possible new career
- to feel useful
- to learn new skills
- to feel like I'm giving something back

6. Do you consider you have any disabilities? (please circle) Yes No

If yes, please give details of any facilities you require:

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7. Please provide details of two referees who would be happy for us to contact them:

At least one referee should know you in a professional/work/volunteering capacity. For students, if none of those apply, please provide us with the name of a tutor.

Referee (1)

Name:

Address:

.....

Telephone no.

E-mail address:

Referee (2)

Name:

Address:

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Telephone no.

E-mail address:

Please send your application to gill@kyra.org.uk or post to:

Kyra Women's Project
(Recruitment & Training Co-ordinator)
Central Methodist Church
St Saviourgate
York
YO1 8NQ