Forena	me:							Last N	lame:					
Address:						I				Eircode/Postcode:				
Pho	ne:													
Ema	ail:													
Are you 18 years or over? Yes No														
Where did you hear about us? (Please tick √)														
COPE 0	Galway	volunt	eer				Volunteer Galway/IVol							
COPE Galway social media							Workplace							
Friend/family							Other (please specify)							
Volunteer role you are applying for:														
(Please specify role) When are you available to volunteer? (Please indicate days and times)														
	,								,		,			
			Monday		Tuesday		Wedne	esday	Thursday		Friday	Saturday	Sund	ay
	Morn	ing												
	Aftern	noon												
	Eveni	ng												
Employment & Education														
Current occupation:														
Education														
_	e tick √		-					1						
Education & Training								National Framework of Qualifications						
Junior Cycle								QQI Level 1-3						
Leaving Certificate/Leaving Cert Applied								QQI Level 4-5						
Advanced/Higher Certificate									QQI Level 6					
Bachelor's Degree/Higher Diploma									QQI Level 7-8					
Master's Degree/Postgraduate Diploma								-	QQI Level 9					
Doctoral Degree								QQ	QQI Level 10					
Other – please specify														
General Information 1. Please tell us why you would like to volunteer with COPE Galway? Is there anything in particular														
		_	-					ith CO	PE Galv	vay?	Is there a	nything in p	articul	ar
you wo	ould lik	e to ge	et fro	m you	r experie	nce?	•							

2. Do you have any specific skills, previous experience, qualities, or areas of interest which may be relevant to the volunteer role?								
3. Do you have any additional information you would like to share with us?								
References								
Please supply us with the names of two people (1 resident in Ireland) that would be willing to act as referees (not relatives/friends). Please note your referees will be contacted when you are recruited and before you start as a volunteer with us. Offer of volunteering subject to successful references.								
Name:	Name:							
Position/title:	Position/title:							
Email:	Email:							
In what capacity do you know this referee?	In what capacity do you know this referee?							
Garda Vetting								
Garda Vetting is required for volunteer roles involved in 'relevant work' with vulnerable persons and children. Offer of volunteering is subject to Garda Vetting disclosure.								
Additional Volunteering at COPE Galway								
From time-to-time COPE Galway needs help at fundraising events and activities. If you would like to help out, are you okay for us to contact you about additional volunteering?								
Yes		No						
COPE Galway Value Your Privacy								
COPE Galway collects, processes, and stores personal information relating to people who apply for and are engaged as employees, volunteers and student placements of the organisation.								
We will store your information securely at all times and only for as long as it is required while you are in the employment of or engaged with COPE Galway and for the requisite period of time afterwards as detailed on the organisation's Records Management and Retention Policy, to comply with the law or to support a claim or defence in court. We will fully respect and adhere to the various rights you have under the General Data Protection Regulations (GDPR), Data Protection Act 2018 and other relevant legislation.								
To read COPE Galway's Privacy Policy in full please visit www.copegalway.ie/privacypolicy If you require further information please email volunteer@copegalway.ie								
Your signature:		Date:						
If you have any questions please contact the Volunteer Office at								
Email: volunteer@copegalway.ie Phone: (091) 778 750								