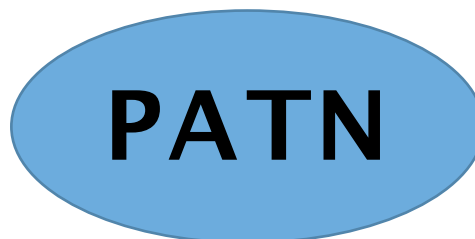


c/o Clarity – Employment for the Blind
Unit 214-218 Victory Business Centre
Somers Road North
Portsmouth
Hampshire
PO1 1PJ

Tel:
Email: studio@patn.org.uk



**Portsmouth Area Talking
News**
For the Blind and Visually Impaired

Volunteer Application Form

Confidential

Name (Mr/Mrs/Miss)

Address:

..... Postcode:

Home Telephone: Mobile:

Email:

Are you in employment? (No / Full time / Part time)

Present / Previous employment

.....

.....

Do you have any disability that would affect the type of help you could give? Yes / No

If Yes, please give details

.....

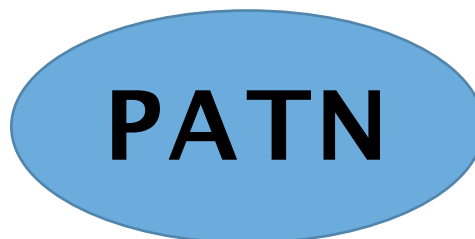
Do you have any particular interests or talents that could be of special help to us? E.g. Reading skills, Editing experience, Computer skills.

.....

.....

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**Portsmouth Area Talking
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For the Blind and Visually Impaired

Blind and partially sighted people are especially vulnerable. Therefore, we would like the name and address of a person (not a relative) who you are known to and who we could contact for a reference.

Do please obtain their consent to our enquiry. We will take up this reference, and any information obtained will be treated in strict confidence.

Referee Details

Name (Mr/Mrs/Miss)

Address:

..... Postcode:

Home Telephone: Work:

Email:

Occupation:

Yourself

Do you have a criminal record? Yes / No Date:

Outline details:

General

All volunteers will be trained with one of our experienced teams.

I wish to be considered as a Volunteer for Portsmouth Area Talking News

My contact details can be shared within the organisation if necessary. Yes / No

Signed: Print Name:

Date: