



ABERDEEN
CITY COUNCIL

***Making the difference:
Volunteering in Aberdeen***

Volunteering Service Pack



Making the difference: Volunteering in Aberdeen



VOLUNTEER OPPORTUNITY DETAILS

***If you have any questions please contact the Volunteer Centre.**

***Fill in a separate form for each different opportunity.**

**Any opportunities you register will appear on Aberdeen City Councils website
www.aberdeencity.gov.uk and Aberdeens Volunteering Gateway : www.volunteeraberdeen.org.uk*

Volunteer Opportunity Reference No:	
Title of Opportunity e.g. driver, administrator etc:	
Name of Directorate and Service:	
Project Title:	
Contact name for this particular volunteer opportunity:	
E Mail:	
Position:	
Tel No:	
Description of the opportunity. Please give a summary of the opportunity. This is your chance to "sell" the opportunity to people so try to make it sound interesting and worthwhile.	
Where does the opportunity happen and what are the travel details?	

Which **one** of the following activities best matches the volunteer opportunity? Please

Administration/Office work	Advice/Information giving	Advocacy/Human Rights
Arts (Music/drama/crafts)	Befriending/Mentoring	Campaign/Lobbying
Care/Support Worker	Catering	Charity Shops/Retail
Community /Economic Dev Work	Committee Work	Computing
Conservation/Gardening	Counselling	Disaster/Emergency relief
Driving/Escorting	Equal Opps/Race relations	Finance/Accountancy
Fundraising	Home-based Volunteering	Justice/Legal assistance
Languages/Translating	Library/Information Management	Management /Business Skills
Marketing/PR/Media	Online Volunteering	Playschemes/Children's Clubs
Practical /DIY	Research/Policy Work	Residential Volunteering
Short term/Seasonal	Specialist/Technical	Sports, outdoor activities
Tutoring/Supporting Learners	Volunteering for under 16s	Youth Work

Which **one** of the following interests/issues best matches the volunteer opportunity? Please

Animals	Anti-poverty work	Arts (music/drama/crafts)
Carers	Children	Crime/Safety
Disaster/Emergencies	Drugs/Alcohol Issues	Education/Literacy
Elderly	Environment	Ethnic Minorities
Families	Gender/Sexuality	Health/Hospitals/Hospices
Homeless/Housing	Human/Civil rights/Justice	Learning disabilities
Men's Groups	Mental Health	Museums/Galleries/Heritage
Offenders/Ex-offenders	Overseas aid/Developing World	Physical disability
Refugees/Asylum seekers	Religion/Faith	Sensory impairment
Sport/Outdoor activities	Tackling Unemployment	Women's Groups
Young people		

Are there any restrictions on who can be a volunteer?

Minimum Age: _____ Maximum Age: _____ Gender restrictions: _____

Please explain why restrictions apply: _____

What skills, attitudes, experience does a person need to do this volunteer opportunity?

When does the volunteer opportunity start? (dates): _____

Is there an end date? If yes please enter (dates): _____ **or** is it ongoing (if YES):

How many hours per day, week etc would a volunteer need to do for this opportunity e.g. 4 hours per week, 2 hours per fortnight, etc:

_____ Hours per [day] [week] [fortnight] [month] [quarter] (please circle)

Other (please describe): _____

Is there a minimum commitment expected of the volunteer e.g. 6 weeks, 3 months etc.

_____ (Enter a number) [days] [weeks] [months] [years] (please circle)

Other (please describe): _____

Please when the opportunity happens. as many boxes as appropriate.

	Morning	Afternoon	Evening/Night	Does the opportunity take place in school holidays?
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the opportunity take place in term-time? <input type="checkbox"/> Yes <input type="checkbox"/> No
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Saturday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sunday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

--	--	--	--

What selection method(s) will be used for prospective volunteers? ✓

Application Form		PVG scheme		Trial Period	
References		Informal Chat		Other(s):	
Interview		Induction/Training			

Will the volunteer be offered induction/start up training?	Yes	No
Will the volunteer be offered on-going training?	Yes	No
Will the volunteer be offered support?	Yes	No

Please give a brief description of any relevant induction ongoing training and support for the volunteer (Aberdeen City Council's Corporate Induction will be offered if the volunteer opportunity is for 6 months or more only)

Is there wheelchair access where the opportunity happens?	Yes	No
Are there wheelchair accessible toilets where the opportunity happens?	Yes	No
Are travel expenses available for volunteers?	Yes	No

If yes, please give details on how and when expenses are paid e.g. we pay public transport rates and reimburse volunteers every week

All Bona Fida Volunteers are covered under the Councils Employers Liability policy when they are volunteering in or out of Council buildings.

The information you have given will help us signpost prospective volunteers to your organisation, and to monitor and improve the quality of our services. The information will be entered on to our database and certain parts of it will appear on our website. If you have decided against this, the information will be held on our database to be used by our staff to advise prospective volunteers about your volunteering opportunities. The information will be used in accordance with the Data Protection Act 1988. If you wish to see information held by us about your organisation, please write to the address below.

"I have read the information above and I confirm the details given are correct. I am authorised to sign this on behalf of my organisation"

Name: _____ Position in Organisation: _____

Date: _____

If there is any other areas of your work in which you might wish to develop volunteer opportunities, please this box and we'll get in touch with you:

Please keep a copy of this form for your own records, and return it via e-mail to:

Thank you for completing this form.

Please take a copy of this form for your records.

Please return via e-mail to:

Volunteering@aberdeencity.gov.uk

or if by post:

Lyndsay Johnstone
Aberdeen City Council
Marischal College
Corporate Governance
Customer Service and Performance
Community Planning
Second Floor North
Aberdeen
AB10 1AB
tel: (01224) 523834

***Making the difference:
Volunteering in Aberdeen***



VOLUNTEER OPPORTUNITY APPLICATION FORM

Volunteer Opportunity Reference No:		
-------------------------------------	--	--

Name
Address
Telephone: ☎ (day) (evening)
Email: ✉

Please tell us about any relevant experience you have. This may be work experience (paid or voluntary) or it may, for example, be caring for family members or other life experiences.

Please tell us about any skills you have (for example, driving a car, playing a musical instrument)

Have you any other hobbies or interests?

Why are you interested in volunteering?

Are there any particular tasks or group of people you would like to volunteer with?

Would you be interested in participating in the Saltire Awards? Further information please go to www.saltireawards.org.uk

Is there anything else you would like to say about yourself, which you feel is relevant?

When are you available for voluntary work? Please as appropriate. Should you only be available for any particular day and time please detail in the relevant box

Mornings	Afternoons	Evenings	Availability
			Weekdays
			Weekends
			Particular day/time

Please give us the names and addresses of 2 people who would be prepared to give you a reference (someone outside your family who has known you for sometime)

1.

2.

Certain volunteering roles, involving contact with children, young people and vulnerable adults will require declaration of unspent convictions and for a disclosure to be obtained. This will only be sought with your consent at the appropriate stage for successful applicants.
A previous conviction does not necessarily mean you will be unable to volunteer with us.

Signed	Date
--------	------

Thank you for completing this form.

Please return via e-mail to:

volunteering@aberdeencity.gov.uk

or if by post:

Lyndsay Johnstone
Aberdeen City Council
Marischal College
Corporate Governance
Customer Service and Performance
Community Planning
Second Floor North
Aberdeen
AB10 1AB

***Making the difference:
Volunteering in Aberdeen***



VOLUNTEER REFERENCE FORM

Volunteer Opportunity Reference No:		
--	--	--

Volunteers Name
Address
Telephone: ☎ (day) (evening)
Email: ✉

Referee's name and address

How long have you known the applicant and in what capacity?

Please comment on the applicant's abilities and skills that you consider may be relevant to the proposed voluntary placement?

Please comment on the suitability of the applicant to volunteer with our organisation

In your opinion how able is the applicant to handle confidentiality along with other responsibilities that may be involved in this work?
--

Are there any aspects of being a volunteer, relevant to this placement, that you think the applicant may have difficulty with? If so, what?

Do you have any other comments you consider relevant regarding suitability for this volunteering placement?

Signed

Date

Certain volunteering roles, involving contact with children, young people and vulnerable adults will require declaration of unspent convictions and for a disclosure to be obtained. This will only be sought with your consent at the appropriate stage for successful applicants. A previous conviction does not necessarily mean you will be unable to volunteer with us.

Thank you for completing this form.

Please return via e-mail to:

volunteering@aberdeencity.gov.uk

or if by post:

Lyndsay Johnstone
Aberdeen City Council
Marischal College
Corporate Governance
Customer Service and Performance
Community Planning
Second Floor North
Aberdeen
AB10 1AB

.

***Making the difference:
Volunteering in Aberdeen***



VOLUNTEER INDUCTION CHECKLIST

Activity	Person responsible	When	Tick when done
Welcome and Introductions		First day	
Introduction to the organisation, its policy and procedures		First day	
Guidelines for volunteers		First day	
Tour of the building and introductions		First day	
Domestic matters		First day	
Volunteer Agreement		First day	
Named contact/support person		First day	
Voluntary work task outline		First day	
The structure of the organisation		First week	
Volunteer Policy		First week	
Volunteers' Handbook		First week	
Team meetings		First week	
Support and Supervision		First week	
Induction review		First week	
Work plan		First month	
Training requirements		First month	
Background reading (if appropriate)		First month	
Support		Ongoing	

Making the difference: Volunteering in Aberdeen



VOLUNTEER OPPORTUNITY IDENTIFICATION PROCESS

Name of Volunteer: _____							
Volunteer Opportunity Reference No: _____							
Name of Directorate and Service: _____							
Project Title _____							
Volunteer Line Manager : _____							
Address: _____							
Position: _____ Tel No: _____							
E Mail: _____							
Start Date of Volunteer _____ Expected End Date _____							
Building Access							
Please Tick <input checked="" type="checkbox"/> :							
Marischal College		Balgownie One		Town House		Frederick Street	
Other :							

Name: _____ Position in Organisation: _____

Date: _____

Please take a copy of this form for your records.

Please e-mail to:

IDBadge@aberdeencity.gov.uk

**Making the difference:
Volunteering in Aberdeen**



VOLUNTEER AGREEMENT

This Volunteer Agreement describes the arrangement between Aberdeen City Council and you. We wish to assure you of our appreciation of your volunteering with us. We will do the best we can to make your volunteer experience with us both enjoyable and rewarding.

Volunteer Opportunity Reference No: _____ Volunteer _____

Start date: _____ Responsible to: _____

My agreed voluntary time commitment is _____ Main duties: _____

Organisation

To provide thorough induction on the work of the organisation, its staff, your volunteering role, and the initial training you need to carry your tasks
To explain the standards we expect you to work to, and the support we offer to enable you to achieve them
To provide a named person who will meet with you regularly to discuss your volunteering, and any successes or problems
To pay reasonable out of pocket expenses as agreed in advance
To provide a safe and healthy working environment
To provide adequate insurance cover for volunteers whilst undertaking voluntary work on our behalf
To ensure that all volunteers are treated in accordance with our equal opportunities policy
To resolve fairly any difficulties, grievances or problems
To provide additional training, as appropriate and when available

Volunteer

To use support, guidance and feedback offered and to participate in appropriate induction
To help the organisation fulfil its services
To follow the organisations procedures and standards in relation to its staff, volunteers and clients
To perform my volunteering role to the best of my ability
To maintain confidential information in accordance with the organisation's confidentiality guidelines and data protection
To meet agreed time commitments, and to give reasonable notice where this is not possible
To bring any concerns relating to your role to the named person or other, as appropriate
To provide receipts for out of pocket expenses (where appropriate)

Signature _____ **(organisation)** **Date** _____

Signature _____ **(volunteer)** **Date** _____

***Making the difference:
Volunteering in Aberdeen***



RISK ASSESSMENT SHEET

Activity –

Where -

Suggest control measures for guidance only – adapt to own situation

Hazard	Those at Risk	Control Measures	Risk Rating	Further Action
Vehicular Accident whilst travelling in minibus		•		
Weather		•		
Leader Error		•		
Exhaustion and hypothermia		•		
Equipment		•		
Slips trips and falls		•		
Biohazards		•		
Manual Handling		•		
Tools, Work equipment		•		
Other Users		•		

Risk Assessment carried out by:

Position

Signed

Date:

Reviewed by:

Position

Signed

Date:

Reviewed by:

Position

Signed

Date: