



Volunteer Application Form

Please send all replies to:
Colin Breeze
17 Osborne Avenue
Wallasey, Merseyside, CH45 1JD
☎/📠: 0151 630 1182

📧: Brasstacksuk@aol.com www.brass-tacks.org.uk

Introduction:

Thank you for your interest in wanting to serve the Lord through the work of Brass Tacks.

Before completing the following application it is important that you understand and agree with our statement of faith. If you have any queries after reading this, please contact us before you complete the rest of the application.

Brass Tacks - Statement of Faith

The Bible is the wholly inspired word of God.

All are sinners with no hope of eternal life apart from salvation, which is by grace, through faith in the atoning death and shed blood of Jesus Christ.

Jesus Christ is the Son of God, co-eternal life with the Father, holy and undefiled, separate from sinners, was born of a virgin, died, rose again from the dead and is now exalted at the right hand of the Father, soon to return as King of Kings and Lord of Lords, and is the only mediator between God and man.

The Holy Spirit is the third person of the Godhead, actively seeking to teach and convict men of sin, righteousness and judgement, revealing the things of Christ, indwelling and empowering the servants of God.

It is the task of the believers, the Church, the Bride of Christ to preach the Gospel to every creature, teaching and baptising all those who believe.

Declaration:

I agree with the Brass Tacks statement of faith as printed above and will seek to maintain the unity of the project team by putting aside any denominational or church practice preferences and differences and by giving my full support to the project team leadership.

Signed:..... Dated:.....

The Application Form:

Having signed the above declaration, you will now need to complete the application form by answering the questions carefully and prayerfully. The answers you give will help us match your skills to appropriate projects, so it is important that you are as honest and as clear as possible with regard to your ability.

Any details you submit to Brass Tacks will be held in the strictest of confidence on our office computer.

After completing the "Volunteer" section, please pass the document to your Church Elders / Leaders for their endorsement under the "Church Commendation" section.

Once all details have been completed, please return the form, along with **two passport sized photographs** to the address shown on the front of the application.

On receipt of this application the Executive Director will contact you to arrange an informal interview

Additional Notes:

Oversees Volunteers:

If you will be travelling to a tropical country to work on a project, the Trustees of Brass Tacks will require you to complete forms for a health check by Interhealth.

The purpose of this check is to ensure that, as far as possible, you do not suffer from any illness that may be worsened by the country you visit and that you are physically able to undertake the type of project work likely to be encountered.

A Personal Health Form (PHF) is enclosed.

Short Term Workers:

On certain projects, and dependent on the duration of the visit, you may be able to make application for inclusion in the Echoes of Service "Short Term Workers" list.

If such an application is to be made, do you agree to a copy of your Volunteer Application Form being sent to them?

| | |
|-----|--------------------------|
| YES | <input type="checkbox"/> |
|-----|--------------------------|

| | |
|----|--------------------------|
| NO | <input type="checkbox"/> |
|----|--------------------------|

Criminal Records Bureau (CRB):

Some of our projects may require you to complete a Criminal Records Bureau disclosure application. Do you hold a CRB Disclosure Certificate?

| | |
|-----|--------------------------|
| YES | <input type="checkbox"/> |
|-----|--------------------------|

| | |
|----|--------------------------|
| NO | <input type="checkbox"/> |
|----|--------------------------|

If Yes, what is the date of issue?: _____

Volunteer Application Form *(to be completed by all volunteers)*

| Section 1 – About You | | | |
|---|--------|-------------|--|
| Full Name (as on your passport) | | Male/Female | |
| Name by which you are known | | | |
| Address | | | |
| Post Code | | | |
| Telephone Numbers | | | |
| Home (inc.STD) | Mobile | Work | |
| | | | |
| e-Mail address | | | |
| Marital Status | | | |
| No. of Dependants / Children | | | |
| Passport Number | | | |
| Date of Passport Expiry | | | |
| Nationality on Passport | | | |
| National Insurance Number | | | |
| Town & Country & date of Birth | / / | | |
| How did you hear about the work of Brass Tacks? | | | |
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| Section 2 – Your Next of Kin | |
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|-----------------|--|
| Their Full Name | |
| Contact Address | |
| Post Code | |

| Telephone Numbers | | |
|-------------------|--------|------|
| Home (inc.STD) | Mobile | Work |
| | | |

| | |
|---|--|
| Section 3 – Your General Health & Well-being | |
|---|--|

| | |
|---|--|
| Are you receiving regular treatment? (If “Yes”, please give details) | |
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|---|--|
| Do you have any illnesses that would prevent you from undertaking manual work? (If “Yes”, please give details) | |
|---|--|

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|---|--|
| Do you suffer from allergies or do you suffer from allergic reactions? (If “Yes”, please give details) | |
|---|--|

| | |
|---|--|
| Do you have any strong dislikes? (If “Yes”, please give details) | |
|---|--|

| Section 4 – Your Education | |
|--|--|
| What subjects did you study up to & including 'A' Level? | |
| Do you hold a degree? (If "Yes", please give details) | |
| Other Qualifications (If "Yes", please give details) | |
| Are you still studying? (If "Yes", please give details) | |

| Section 5 – Your Work Experience | |
|---|--|
| Your Current Role | |
| Job Title | |
| Brief Role Description | |
| Period From | |
| Previous Work Experience / Roles | |
| Job Title | |
| Description | |
| Period (From /To) | |
| Job Title | |
| Description | |
| Period (From /To) | |

| | | | | | |
|---|-----|-----------|---------|-----|-----|
| Job Title | | | | | |
| Description | | | | | |
| Period (From /To) | | | | | |
| Other Training / Skills / Experience | | | | | |
| Do you have any special training, skills, licences or certificates that may be of use in the work? (If "Yes", please give details) | | | | | |
| Have you undertaken any other volunteer / paid work with Christian organisations? (If "Yes", please give details) | | | | | |
| Section 6 – General Details | | | | | |
| Do you hold a clean valid driving licence? | | | | | |
| What categories of vehicle are you entitled to drive? | Car | Motorbike | Minibus | PSV | HGV |
| Have you ever been prevented from driving due to a medical condition? (If "Yes", please give details) | | | | | |
| What are your hobbies and interests? | | | | | |
| What words best describe your personality / behaviour? You may include up to 6 (e.g. Quiet, Outgoing) | 1. | | 4. | | |
| | 2. | | 5. | | |
| | 3. | | 6. | | |

| | |
|---|--|
| Is there anything else you think might be of interest in supporting your application? | |
|---|--|

Section 7 – Your Church Background

| | |
|---|--|
| How long have you been a Christian? | |
| Which church do you attend? (If less than 1 year, please also give details of your previous church) | |
| How long have you been attending this church? (If less than 1 year, please also give the time spent at your previous church) | |
| How long have you been a church member? | |
| Do you have any responsibilities within your church? | |
| How do you keep in touch with missionary needs? | |

Section 8 – Your Travel Experience

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| Have you travelled before? (If “Yes”, please give details) | |
| Do you speak any foreign languages? (If “Yes”, please give details) | |

Section 9 – Project Details

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|---|--|
| What project(s) are you interested in helping with? | |
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| | |
| When are you available to travel? | |
| How flexible are these travel dates? | |
| Do you have sufficient funds available to go towards travel expenses? | |
| If you do not have sufficient funds, would you be able to raise any support from your church or other source? | |
| | |

End of Volunteer Application Form

Please now give your application form to your church leaders so they may complete the information on the following page.

Church Commendation (to be completed by church leader / Elder then posted to the Brass Tacks office 17 Osborne Ave Wallasey CH45 1JD)

It is important that the volunteer named in Section 1 of this application form, has the full backing and support of you their church leaders in seeking to serve God in this way.

Undertaking practical work, mixing with different people and cultures and being absent from home can be an unsettling and uncomfortable experience for many volunteers.

To help ensure the safety, welfare and experience of your church member in working with us, it is essential that we understand as much about them as possible.

| Section 10 – Church Leader / Elder Comments | |
|--|--|
| How long have you known the applicant? | |
| When was the applicant baptised / received into church fellowship? | |
| What church activities is the applicant currently involved with? | |
| Has the applicant previously been involved with other church or Christian related activities? (If “Yes”, please give details) | |
| Do you agree with the words the applicant uses to describe their personality / behaviour in Section 6? | |
| How would you describe the applicant’s temperament and self control? | |
| Does the applicant show a commitment to hard work? (If “Yes”, are you able to give an example?) | |

| | |
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| Is the applicant able to work in a team environment? | |
| Section 10 – Church Leader / Elder Comments....cont..../ | |
| Is the applicant more of a team member or a team leader? | |
| Does the applicant have the ability to cope with unexpected difficulties and crises? (If “Yes”, are you able to give any examples?) | |

| | |
|--|--|
| Will the church be able to financially assist the applicant? (If “Yes”, please give details?) | |
|--|--|

As Leaders / Elders of _____ (enter name of church) _____ we wholeheartedly support this application and endorse the applicant for working with Brass Tacks.

Church Leader / Elder

| | | | |
|-------------|--|-----------|--|
| Name | | Signature | |
| Address | | | |
| Post Code | | | |
| Contact No. | | | |

Church Leader / Elder

| | | | |
|-----------|--|-----------|--|
| Name | | Signature | |
| Address | | | |
| Post Code | | | |

| | |
|-------------|--|
| Contact No. | |
|-------------|--|