

**THE SIMON COMMUNITY
PART-TIME VOLUNTEER FORM**

ForeName(s): _____ Surname: _____ Our ref: ___-___

Date of birth: ___/___/19___ Nationality: _____ Male/Female: _____

Tel no. Work : _____
 Home: _____
 Mobile: _____

E-mail address: _____

Current Address: _____ Permanent Address: _____

_____ Post-Code _____

Present Occupation:

Previous relevant experience:

Interests / Hobbies / Societies:

Any serious past or present physical or mental illnesses?

Useful practical skills:

Do you have a clean driver's licence? YES / NO

Would you be willing to drive the Community vans? YES / NO

- when was it issued? _____ - what classes? _____

How did you hear about the Simon Community? _____

What interests you about living and working with homeless people?

'Simon' aims to be a Community rather than an institution. Our philosophy is acceptance and tolerance and we do not aim to rehabilitate people. How do you feel about this?

Are there any reasons why you want to work with 'Simon' rather than another organisation?

What do you consider to be your major strengths and weaknesses?

What do you expect to gain from working with the Simon Community?

Approximate date to begin:

Signature: _____ Date: _____

Please send this form to:
The Simon Community, 129 Malden Road, Kentish Town, Camden London, NW5 4HW.
We will then contact you to arrange for you to visit. Tel: 0207-4856639