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Volunteer

Registration

Pack

Summer Scheme Assistant

To register for Volunteer Opportunities please complete this pack and return to:

**volunteer@fermanaghomagh.com**

or the following address:

**Human Resources**

Fermanagh and Omagh District Council

Townhall

2 Townhall Street

Enniskillen

Co. Fermanagh

BT74 7B

**Volunteer Role Description:**

Summer Scheme Assistant

V021

**What is a Programme Assistant Volunteer?**

To assist with the supervision of activities, in safe environment, during the Council Summer Scheme.

**Main Volunteering Tasks:**

* Assist with the implementation of a programme of activities for 5 - 14 year olds as part of the Council’s Summer Scheme programme including sports, games and arts and crafts.
* Assist with providing supervision as required for any activity as promoted as part of the Summer Scheme.
* Ensure full compliance with health and safety requirements and legislation in accordance with Council policies and procedures.
* Undertake any other appropriate tasks that may be requested.
* To comply with all the Council’s policies and procedures.
* To undertake volunteering at all times in a manner that enhances and promotes the positive image of Fermanagh and Omagh District Council.

**Supervisor:**

Community Support Officer

**Location:**

Various in Omagh & Enniskillen

**Dates/ Time of Volunteering:**

6th – 31st July 2020

**Closing Date:** Friday 7 February 2020 at 12 noon

The volunteering may be subject to:

* References
* Access NI Check (where appropriate)



**Volunteer Registration Form**

**Please note:** the information you give on this form will be used to match potential volunteers with the most appropriate opportunity at the time the registration form is received.

In accordance with the Data Protection Act 2018, Fermanagh and Omagh District Council has a duty to protect any information we hold on you. The personal information you provide on this form will only be used for the purpose of arranging meetings and times for volunteering and will not be shared with any third party unless law or regulation compels such a disclosure and will be shared with other relevant internal services for the purpose of volunteering. For further guidance on how we hold your information please visit the Privacy section at [www.fermanaghomagh.com/your-council/privacy-statement/](http://www.fermanaghomagh.com/your-council/privacy-statement/)

**Contact Details:**

Name:

Address:

Postcode:

Date of Birth:

Telephone Number:

Email Address:

Emergency Contact Name:

Emergency Contact Phone Number:

**Please tell us why you are interested in volunteering with the Council:**

**What skills, knowledge and/or experience do you have that will help in this volunteering role:**

**Please indicate if there any additional support that you would require whilst volunteering (For example medical/ health needs, dietary requirements or access requirements).**

**Please provide two referees (who are not relatives) that can be contacted to provide a reference:**

Name:

Address:

Postcode:

Telephone Number:

Email Address:

Name:

Address:

Postcode:

Telephone Number:

Email Address:

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you for your interest in volunteering with Fermanagh & Omagh District Council**



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**Fermanagh and Omagh District Council**

**Equal Opportunity Monitoring Sheet**

In accordance with the Data Protection Act 2018, Fermanagh and Omagh District Council has a duty to protect any information we hold on you. The personal information you provide on this form will only be used for the purpose of Equal Opportunity Monitoring only and will not be shared with any third party unless law or regulation compels such a disclosure and will be shared with other relevant internal services for the purpose of volunteering. For further guidance on how we hold your information please visit the Privacy section at [www.fermanaghomagh.com/your-council/privacy-statement/](http://www.fermanaghomagh.com/your-council/privacy-statement/)

Fermanagh and Omagh District Council is committed to achieving fairness and equality. We want to ensure that information stored on Council Volunteers is both up-to-date and accurate, in relation to Section 75 and Equality Monitoring.

In order to achieve this goal, **we need your help.** One of the most important ways of doing this is by monitoring our Volunteers across eight of Section 75 categories. The information provided will be used by Fermanagh and Omagh District Council to assist in complying with our statutory duty under the Northern Ireland Act 1998 and will be reported to the Council’s Policy and Resources Committee.

All information will be collated confidentially and stored securely. Final reports will contain overall statistics and will **not** include names, or the ability to match certain statistics to individual employees.

**Fermanagh and Omagh District Council Equality Monitoring (Volunteers)**

1. **Religious Belief**

Do you have a religious or denominational belief? Yes No   
  
If Yes are you:

Bahai  Hindu  Presbyterian 

Baptist  Jewish  Roman Catholic 

Buddhist  Methodist  Sikh 

Church of Ireland  Muslim  Other 

1. **Political Opinion.**

How would you describe your political opinion?

Unionist generally  Nationalist generally  Other

1. **Racial Group**

To which of these Racial Groups do you consider you belong?

Bangladeshi  Chinese  Pakistani 

Black African  Indian  White 

Black Caribbean  Irish Traveller  Other 

Black (Other)  Mixed Ethnic Group 

1. **Age.**   
   1. 16-29 30-44 45-59 60-74 75+
2. **Marital Status.**

Civil Partnership  Single  Widowed 

Co-habiting  Separated 

Divorced  Married 

1. **Sexual Orientation.**

How would you describe your sexual orientation?

Heterosexual  Homosexual (Gay or Lesbian)  Bi-sexual

1. **Gender.**

Female Male Trans-gendered 

1. **Disability.**

Under the Disability Discrimination Act 1995, a disabled person is defined as a person with “a physical or mental impairment which has a substantial and long-term effect on his/her ability to carry out normal day to day activities”.

Do you consider that you meet this definition of disability? Yes No

If yes, please state the type of disability,

Visual Impairment Communication Difficulty Learning Difficulty

Hearing Impairment Multiple Impairment

Mobility Impairment Learning Difficulty

1. **Dependants.**

We are asking you to tell us something about your caring responsibilities. By that we mean looking after a child, whether as a parent, guardian or foster parent, or helping an adult carry out their daily routine. This might mean providing assistance to an adult relative or friend who is disabled or has a long-term illness.

I look after children I help an adult with their daily routine N/A 

Please indicate how often you undertake these responsibilities:

Daily  Frequently  Occasionally 

**For office use only:**

Date Received: