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| Cyrenians LOTUS CommunitY  Volunteer Translator - Vietnamese Application |  |

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| Basic Information About You | | | | | | | | | | | | | |
| First Name(s) |  | | | | | Last Name |  | | | | | Date of birth | dd/mm/yyyy |
| Address | |  | | | | | | | | | | | |
| Country | | |  | | | Telephone (include country and area code) | | | | |  | | |
| Mobile/Cell Phone (include country code) | | |  | | | E-mail Address | |  | | | | | |
| For visa purposes, which countries do you hold citizenship or a passport for? | | | | |  | | | | | | | | |
| IF YOU ARE APPLYING FROM OUTSIDE THE UK, YOU MAY NEED A VISA TO VOLUNTEER WITH US. Please email [Communitiesplacements@cyrenians.scot](mailto:Communitiesplacements@cyrenians.scot) for further information before completing this application form. | | | | | | | | | | | | | |
| Education | | | | | | | | | | | | | |
| Tell us about any training courses, qualifications, etc., you have gained. | | | | | | | | | | | | | |
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| Tell us about any work experience or volunteering you have done (if any) either related to languages skills or other fields | | | | | | | | | | | | | |
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| 1. **VOLUNTEERING WITH CYRENIANS** | | | | | | | | | | | | | |
| What has led you to deciding you would like to volunteer for Cyrenians? | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| 1. **PRACTICAL INFORMATION** | | | | | | | | | | | | | |
| How long would you like to volunteer with us? | | | | | | | | | | | | | |
| 6 months  over 6 months | | | | | | | | | | | | | |
| When is the earliest you could start? | | | | dd/mm/yy | | | | | When is the latest you could finish? | | | dd/mm/yy | |
|  | | | |  | | | | |  | | |  | |
| References | | | | | | | | | | | | | |
| Before you volunteer with us, we will take up references. Please provide us with two referees who should have known you for at least one year, and are **not** family members or a personal friend. Acceptable references are Teacher, Employer, Lecturer etc.  (If you are struggling to find a referee who can complete the form in English, please let us know by emailing the address below and we will do what we can to help.) | | | | | | | | | | | | | |
| 1. Full Name |  | | | | | | Relationship  to you: | | | |  | | |
| Email |  | | | | | | Phone (including country code) | | | |  | | |
| Address |  | | | | | | | | | | | | |
| 2. Full Name |  | | | | | | Relationship  to you: | | | |  | | |
| Email |  | | | | | | Phone (including country code) | | | |  | | |
| Address |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| 1. **DECLARATION** | | | | | | | | | | | | | |
| I declare that all the information given in this form application is true and I understand that false or misleading information will lead to my exclusion from the selection process or dismissal in the event of my appointment. | | | | | | | | | | | | | |
| **Signed** | | | |  | | | | | **Date** |  | | | |
| (If you are completing this form electronically, please just type your name)  Please email your completed form to:[**communitiesplacements@cyrenians.scot**](mailto:communitiesplacements@cyrenians.scot) **/** [**luciasantana@cyrenians.scot**](mailto:luciasantana@cyrenians.scot) | | | | | | | | | | | | | |
| 1. EQUAL OPPORTUNITIES MONITORING | | | | | | | | | | | | | |
| It would help us greatly if you could please complete the equal opportunities monitoring form here: <https://cyrenians.scot/equal-opps-test-form/>  All responses are confidential and not linked to your application. | | | | | | | | | | | | | |