

## Master Composter Volunteer Registration Form

This scheme is only open to residents of Leicestershire (excluding Leicester City)

### Personal Details

Title: Mr / Mrs / Miss / Ms / Other (please indicate) \_\_\_\_\_

Surname \_\_\_\_\_

Forename(s) \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

County \_\_\_\_\_ Post Code \_\_\_\_\_

Tel no: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Applicants will be contacted for an informal chat. Please indicate how and when you would prefer to be contacted:

Telephone       Mobile

Weekday morning 9am - 12pm

Weekday afternoon 12pm - 6pm

State specific time if preferred \_\_\_\_\_

Do you already compost at home?

(Please remember you don't need to be a composter already; that can come with training and practice)

Yes, please state how long you have been composting: \_\_\_\_\_

No

## Voluntary Activities

Why do you wish to volunteer and what do you hope to gain from volunteering as a Master Composter?

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Do you have any previous voluntary experience?

Yes     No

(You do not need any previous volunteer experience or involvement with community groups to become a volunteer)

If 'Yes' please give details here

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Do you have any special interests / skills / qualifications that you feel would be useful?

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### Additional information

Do you have any medical or health problems that we should be aware of that could affect your role as a volunteer? (*E.g. heart problems/ asthma/ diabetes/ limited mobility*)

Yes     No

Details:

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### References:

*All such information is kept strictly confidential.*

Please could you give the names and addresses of two people (other than a spouse or a relative) to whom we could apply for a written/telephone personal reference?

Name & address of referee 1	Name & address of referee 2
Name:	Name:
Address:	Address:
Post code:	Post code:
Tel number ( <i>if known</i> ):	Tel number ( <i>if known</i> ):
In what capacity do you know them?	In what capacity do you know them?

## **CRB CHECK**

Some voluntary activity is subject to a satisfactory Criminal Records Bureau Check, which may be standard or enhanced depending on the nature of the work undertaken. If this is so, then a CRB form would need be completed by yourself. A criminal record does not necessarily bar you from becoming a volunteer but, depending on the offence, it may possibly change the type of voluntary work you may do.

**I confirm that, to the best of my knowledge and belief, the details given on this form are true and correct.**

**Signature**

**Date**

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Please send completed forms to:  
Vicky Galloway, Waste Management, E&T, Room 700, County Hall,  
Glenfield, Leicestershire, LE3 8RJ or  
victoria.galloway@leics.gov.uk

## Information for monitoring

We aim to serve all sections of the community and it would help us if you would complete the form below. Leicestershire County Council is registered under the Data Protection Act and access to information is limited. All such information is regarded as confidential and is only used for statistical purposes.

### Gender

Female       Male

### Age Group

(Master Composters must be over 18)

18 to 29       30 to 44       45 to 59       60 to 64  
 65 to 74       75 and over

### Employment Status

<input type="checkbox"/> Employed - full time	<input type="checkbox"/> Unemployed
<input type="checkbox"/> Employed - part time	<input type="checkbox"/> Unemployed Job Seeker
<input type="checkbox"/> Self employed	<input type="checkbox"/> Student
<input type="checkbox"/> Unable to work	<input type="checkbox"/> Retired
<input type="checkbox"/> At home (house person)	

### Disability

Do you consider yourself as having a long standing illness or disability?

Yes       No

### Ethnicity / Ethnic Origin

Please tick the box that best describes your ethnic origin most closely:

<input type="checkbox"/> White	<input type="checkbox"/> Asian or Asian British
<input type="checkbox"/> Mixed e.g. White/Asian	<input type="checkbox"/> Black or Black British
<input type="checkbox"/> Other ethnic group	