

**Information Form for Finding a Suitable Match**

Thank you for interest in volunteering with Independent Age. To ensure we find the right person for you to visit, please complete the information below and return to volunteer.recruitment@independentage.org.

|  |  |  |
| --- | --- | --- |
| Name of Volunteer |  |  |

**Availability**

When are you available to visit somebody? *Please select as many as possible*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| Morning |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Afternoon |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Evenings |  |  |  |  |  |  |  |

**Travel**

How far are you happy to travel to visit somebody?

|  |  |
| --- | --- |
| Up to 15 minutes from my home |  |
|  |  |
| Up to 25 minutes from my home |  |
|  |  |
| Up to 35 minutes from my home |  |
|  |  |

Do you drive and have access to a car to travel to visit somebody?

|  |  |
| --- | --- |
| Yes |  |
|  |  |
| No |  |

We try to find somebody within close travel distance to your home postcode. Is there another area in London that would suit you to visit an older person? Please specify the postcode below (e.g. work postcode).

|  |
| --- |
|  |

**Additional Information**

Do you have any experience of working with older people or vulnerable people? Please briefly explain below and include any personal experience you have.

|  |
| --- |
|  |

Do you have any allergies?

|  |  |
| --- | --- |
| Yes |  |
|  |  |
| No |  |

If yes, please specify:

|  |
| --- |
|  |

Have you any issues with smoking or pets?

|  |  |
| --- | --- |
| Yes |  |
|  |  |
| No |  |

If yes, please specify:

|  |
| --- |
|  |

Do you have any mobility issues we should be aware of?

|  |  |
| --- | --- |
| Yes |  |
|  |  |
| No |  |

If yes, please specify:

|  |
| --- |
|  |

We understand that sometime volunteers have a preference for visiting a male or female older person.  If you have a preference please let us know.

|  |
| --- |
|  |

No preference

|  |
| --- |
|  |

Female

|  |
| --- |
|  |

Male

Do you have any further information that you think we should be aware of?

|  |
| --- |
|  |

Thank you for taking the time to complete this form. Please return to volunteer.recruitment@independentage.org. All information in this form will be treated confidentially and only used for the purpose of finding an older person for you to visit.