

Duke of Edinburgh Volunteer Interest Form

Please write key information clearly in BLOCK CAPITALS

This page is your opportunity to tell us about yourself and why you would like to do your D of E Volunteering segment at Headstone Manor Museum. Answer the questions as fully as you can.

| | |
|---|--|
| Name: | |
| Date of Birth: | |
| Which school do you attend? | |
| When would you like to start volunteering? | |

Tell us about any activities you take part in outside of lesson time, any volunteering or work experience you already have and how you heard about us.

Please provide the name and contact details of the Duke of Edinburgh Supervisor at your school.

| | |
|------------------------|--|
| Name: | |
| Contact Number: | |
| Email Address: | |

Declaration: *I certify that the information contained on this form is correct.*

| | |
|--|--|
| Signature: | |
| Parent/Guardian signature: <i>(if you are under 18 years.)</i> | |
| Parent/Guardian name & contact number: | |
| Date: | |

Thank you!