

# Kettering Mind Volunteer Application Form



For better  
mental health

NAME  DOB

ADDRESS

TEL NO

How did you hear about Mind?

What is your usual occupation?

What times are you available?

What are your hobbies/interests?

Why are you interested in being a volunteer for Kettering Mind?

*Please give names and full addresses of two sponsors (who are not related to you), who we will contact – one of these should be someone of standing in the community:*

## **SPONSOR 1**

NAME:	<input type="text"/>
ADDRESS:	<input type="text"/>
TELEPHONE NO:	<input type="text"/>

## **SPONSOR 2**

NAME:	<input type="text"/>
ADDRESS:	<input type="text"/>
TELEPHONE NO:	<input type="text"/>

Kettering Mind is committed to Mind's Quality Standards

Reg. Charity No: 1069373  
Reg. Company No: 3530898