



**WISE UP
WORKSHOPS
CIC**

Workshops **I**n **S**ervices **E**verywhere

Using **P**erson-centred skills

YOUR NAME: (AS YOU LIKE TO BE KNOWN)

D.O.B:

ADDRESS: (IF YOU ARE A STUDENT THIS IS YOUR TERM ADDRESS)

TELEPHONE NUMBER:

EMAIL ADDRESS:

CONTACT IN CASE OF EMERGENCY/ NEXT OF KIN DETAILS:

ANY MEDICAL CONDITIONS/IMPORTANT INFO:

CURRENT DBS/CRB NUMBER:

UTR NUMBER (IF SELF-EMPLOYED):

WOULD YOU LIKE TO JOIN OUR TIME-BANKING SCHEME?

WHY WOULD YOU LIKE TO JOIN THE WISE UP TEAM?

SKILLS/ WORK EXPERIENCE: (PAST 5 YEARS)

WHAT DO YOU UNDERSTAND WISE UP TO OFFER TO PEOPLE AND ITS BENEFITS TO THE COMMUNITY?

DESCRIBE IN ONE SENTENCE WHAT MAKES YOU WHO YOU ARE:

WHAT WOULD YOU LIKE FOR YOUR FUTURE?

YOUR AVAILABILITY INCLUDING EVENINGS/ SCHOOL HOLIDAYS:

(PLEASE FILL OUT SEPARATE FORM ABOUT FOR PRE BOOKED COMMITMENTS & HOLIDAYS)

ARE YOU WILLING TO WORK AT EVENTS & FESTIVALS? & IN OTHER AREAS SUCH AS CUMBRIA?

WOULD YOU BE WILLING TO JOIN OUR VOLUNTARY PROMOTION TEAM?

2 REFEREES: MUST BE A PROFESSIONAL/TUTOR/EMPLOYER

(PLEASE PROVIDE CONTACT DETAILS INCLUDING EMAIL AND TELEPHONE NUMBER)

YOUR SIGNATURE

DATE

ON RECEIPT OF THIS FORM WISE UP WILL PROVIDE YOU WITH AN INDUCTION BOOKLET, YOUR RESPONSIBILITIES AND A WORKING AGREEMENT.

REGARDS

E.ROBERTS