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**Advice Line Volunteer Application Form**

**Name:** .....

**Address:** .....  
.....  
.....

**☎ Contact Numbers:**

Home..... Work .....

Mobile ..... Email.....

**Where can we best contact you in an emergency?**

**Please provide details of your legal qualifications and dates obtained:**

**If you are a qualified solicitor or barrister, do you currently practise (✓ Please tick)? *Please provide a copy of a practice certificate.***

yes                       no                       *certificate enclosed*

**If yes, please tell us which solicitor’s firm/chambers/advice agency/union etc. you work in (please include address):**

**Are there any restrictions on your practice? Are you/have you been subject to any disciplinary proceedings by your professional body?**

**Please give details of any previous experience of work on an advice line or helpline, either in a paid or voluntary capacity:**

**Please outline your experience of advice giving, paid and/or unpaid:**

**Please give details of your experience/knowledge of family law:**

**Do you specialise in, or have an interest in, a particular area of law?**

**Why do you want to volunteer at Rights of Women?**

**Evening advice sessions are currently held on Tuesdays, Wednesdays and Thursdays, between 7 and 9pm. These times are under review. Are you UNABLE to regularly attend on any of these evenings? Which?**

**I cannot attend on: .....**

**We ask you to commit to a minimum of one session per month. How often could you advise each month (✓Please tick)?**

- once                       twice                       three times

**Would you ever be able to volunteer for a day time session (currently Tuesdays, Wednesdays and Thursdays 2-4pm and Fridays 12-2pm)?**

yes

no

**If you would like to add anything else *relevant* to your application, then please do so here (e.g.: interests, involvement in other projects, campaigns etc):**

**Please give two professional references, one of whom should be your present or most recent employer, if applicable. Note that referees will only be contacted following an interview and subject to you being selected.**

Name: ..... Name: .....

Address: ..... Address: .....

.....

.....

Tel: ..... Tel: .....

Relationship to you: ..... Relationship to you: .....

***Thank you for completing this application.***

***The information you have given will be treated confidentially.***

***Please return this form to: Emma Scott, Senior Legal Officer, Rights of Women, 52-54 Featherstone St, London EC1Y 8RT.***

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# RIGHTS OF WOMEN

## Equal Opportunities Monitoring Form

Rights of Women is an equal opportunities employer. In order to measure the effectiveness of our procedures, we would be grateful if you would complete and return this form to us.

Your answers will be treated in the strictest confidence and used only for statistical purposes. This form will not form part of the selection process.

### 1. How would you describe your ethnic origin?

- Black Caribbean     Indian     Chinese     White UK
- Black African     Pakistani     Asian other     Irish
- Black Other     Bangladeshi     Mixed Origin \_\_\_\_\_  
(please state)
- Other Ethnic Group \_\_\_\_\_  
(please state)

### 2. Do you consider yourself to be a disabled person?

- YES     NO

### 3. What is your age? \_\_\_\_\_

### 4. Where did you see this volunteer post advertised?

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**Please place this form in the enclosed marked envelope and return with your application form. Thank you.**