Wildlife Rehabilitation Ireland - Volunteer Application Form

Thank you for your interest in volunteering with Wildlife Rehabilitation Ireland (WRI). These are voluntary roles and do not constitute employment. Please complete this form as fully as possible. All information provided will be handled in accordance with GDPR and WRI's Privacy Policy.

1. Personal Details

Full name: _____

Address: _____

Telephone number: _____

Email address: _____

Emergency contact name: _____

Emergency contact phone: _____

2. Role Information

Please indicate the volunteer role you are applying for:

Please tick as appropriate:

[ ] Administration and Volunteer Support
[ ] Communications Support
[ ] Project Support

3. Motivation and Experience

Why would you like to volunteer with Wildlife Rehabilitation Ireland?

What skills, qualifications, or experience do you have that are relevant to this role?

Please outline any previous volunteering experience, if applicable (e.g. Organisation, your role, duration):

4. Availability

Please indicate your general availability (days/times):

How long are you hoping to commit to volunteering with WRI? _____

5. Safeguarding and Compliance

Are you willing to undergo Garda Vetting if required for the role?
[ ] Yes [ ] No

6. Medical or Support Needs (Optional)

Do you have any medical conditions, disabilities, access needs, or support needs that WRI should be aware of in order to support you safely and appropriately in your volunteering? This information will be treated confidentially.

7. Referee

Please provide details of one referee (not a relative) who can comment on your suitability.

Referee Name: _____

Relationship to you: _____

Organisation: _____

Email: _____

Telephone: _____

8. Data Protection and Declarations

Please tick to confirm:

[ ] I confirm that the information provided is accurate to the best of my knowledge.

[ ] I consent to Wildlife Rehabilitation Ireland processing my personal data for the purpose of assessing my application and managing volunteering activities, in line with GDPR and WRI's Privacy Policy.

[ ] I consent to WRI contacting the referees listed above.

[ ] I understand that volunteering with WRI does not constitute employment.

[ ] I understand that, where relevant to the role, additional declarations or checks may be required, including safeguarding and conflict of interest declarations.

Applicant name: _____

Date: _____

How to return this form

Please return the completed form to **volunteer@wri.ie** and include either a CV or a short summary of your relevant experience.