



Supporting prisoners, their families and friends

Volunteers Personal Information

NAME:

We have various volunteering opportunities please tick the one/s you are interested in

T-Bar in the Visitors Centre

☐

Children's play area in the male visits hall

☐

Supporting prisoners in the Education Department

☐

Gardens /Gardening Club

☐

Other

☐

Address	
Date of birth	
Telephone Number	Mobile
e-mail address	
Have you done any volunteering before?	
How did you first hear about volunteering at HMP Peterborough?	
Have you ever worked in, or been to a prison before?	
Are you currently working? Full / Part time?	
Are there any special requirements you would need in order to volunteer? Do you have any medical conditions or allergies?	
Do you know anyone currently detained in HMP Peterborough?	



Please give details of two people who would be willing to provide character references for you (not family members).

1. Name

Address

Post Code

Tel. No.

2. Name

Address

Post Code

Tel. No.

FOPP is an equal opportunities organisation
The data collected in this form will only be used for the work of the FOPP and will not be disclosed to any external source without your written consent. I agree to opt in to FOPP's GDPR policy.

Signed:

Date:

(Form issue: 08/2022)