

our ref  
your ref  
please ask for Cari Hodkinson  
01473 432220  
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Corn Exchange  
King Street  
Ipswich Suffolk IP1 1DH

[www.ipswich.gov.uk](http://www.ipswich.gov.uk)

## SHOPMOBILITY VOLUNTEERS

Thank you for your interest in becoming a Shopmobility Volunteer.

Ipswich Shopmobility provides free hand propelled and electric wheelchairs and electric scooters to help people who have limited mobility, whether through permanent or temporary disablement, illness, accident or age, to shop and use other facilities in Ipswich town centre.

Within this pack you will find:

- Application Form
- Volunteer Role Description
- Volunteer Specification

Completed application forms should be returned to: Cari Hodkinson, Ipswich Borough Council, Corn Exchange, King Street, Ipswich, IP1 1DH.

Should you require any further information or have any queries please contact me on the telephone number at the top of this letter.

Thank you again for your interest in volunteering and Ipswich Shopmobility.

Yours faithfully,

Cari Hodkinson  
Markets and Shopmobility Manager

## SHOPMOBILITY VOLUNTEER ROLE DESCRIPTION

There are two different volunteer roles at Ipswich Shopmobility.

### Admin role

Duties included in this role are:

- Answering telephone
- Providing information regarding Shopmobility to new and potential members
- Booking of equipment (subject to equipment availability)
- Greeting of customers
- Recording equipment issued on a computer based spreadsheet using Microsoft teams
- Joining new members and issuing membership cards and information
- Informing the Markets and Shopmobility Manager of any damage to equipment/accidents/comments/complaints when they arise
- Assisting other volunteers where possible

### Scooter role

Duties included in this role are:

- Moving equipment from store rooms ready for use by customers
- Returning equipment and accessories to store rooms after use and place equipment correctly on charge
- Removing and return cones over Ipswich Shopmobility car parking spaces
- Assisting customers (when required) to transfer to equipment
- Explaining to new customers how to use the equipment and ensuring they are competent on it
- Attend breakdowns in the town centre with replacement equipment (where available) and returning faulty equipment to Centre (should it not be easily fixed on site)
- Assisting other volunteers where necessary

Both roles report directly to the Markets and Shopmobility Manager.

## PERSON SPECIFICATION SHOPMOBILITY VOLUNTEER

Attributes	Essential	Desirable	Method of Assessment
Qualifications		Experience of MS Excel  Educated to GCSE standard or equivalent	Application form/interview
Relevant Experience		Experience of working in a similar role	Application form/interview
Personal skills	Good customer care  Ability to work as a team member	Experience of dealing with the public	Application form/interview



## SHOPMOBILITY VOLUNTEER APPLICATION FORM

Position applied for: Admin role  Scooter role  Either

Title:	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Ms <input type="checkbox"/>	Other <input type="checkbox"/>		
First name:				Surname:		
Full address:						
Tel Nos.	Home:				Mobile:	
Email:						

### Emergency contact details

Name:	Home Tel:
Address:	Mobile Tel:
	Relation:

Please give details of any other experience, skills and training you have which you feel may be relevant (eg. previous volunteering roles, training, personal interests etc)

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Please indicate when you would be available to volunteer at Shopmobility

Availability:	AM	PM
Monday	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>
<b>Non-availability:</b>		

Morning shifts are 10am-1pm  
Afternoon shifts are 1pm-4pm

Any medical conditions/illnesses we should be aware of:

**Convictions**

Please give details of any convictions you have for criminal offences or state 'none' as appropriate in the box below.

Note: Some convictions become 'spent' after a specified period of time and need not be declared in accordance with the Rehabilitation of Offenders Act 1974.

**Referees**

Please provide details of two referees. References will be taken prior to the offer of any voluntary position.

Name:  
Address:  
  
Tel No:  
Email:  
Relationship  
:

Name:  
Address:  
  
Tel No:  
Email:  
Relationship  
:

**DECLARATION:** I understand giving false information/omitting to give information will make my application unacceptable and, if successful, may lead to the termination of the volunteer arrangement. I declare that the information given in this form is, to the best of my knowledge, correct.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this form to:

**Cari Hodkinson, Ipswich Borough Council, Corn Exchange, King Street, Ipswich IP1 1DH.**