



## Parent Champions Volunteer Application Form

Please complete all sections of the form accurately and return it to: Sarah.Storey@cambridgeshire.gov.uk

<b>Name</b>			
<b>Telephone number</b>		<b>Email</b>	
<b>Address</b>			
<b>Post code</b>			
<b>Are you (please tick):</b>	<b>Mother</b>	<b>Father</b>	<b>Carer</b>
<b>How many children do you have?</b>	<b>What are their ages?</b>		
<b>Where did you hear about volunteering as a Parent Champion?</b>			
<b>Why would you like to volunteer as a Parent Champion?</b> (i.e. you like helping/supporting other parents, you like sharing information and your positive experiences, you like motivating other parents, you would like to gain more skills and confidence to move to training/employment etc)			
<b>Which local services have you used with your child/ren?</b> (i.e. stay and play, child health clinic, childcare, family support)			
<b>What other skills and experiences do you have that will be useful in this role?</b> (i.e. childcare, additional languages, using childcare, using services/activities etc.)			
<b>Do you have any access/support requirements?</b>			
<b>Signature</b>		<b>Date</b>	

If you would like to provide more information please continue on a separate sheet of paper.

**Thank you for your interest in becoming a Parent Champion.**