

CATALYST VOLUNTEER MEDICAL REPORT - PAGE 1 of 2 CONFIDENTIAL

The applicant has applied to be a volunteer on the Catalyst programme with Ashburnham Christian Trust, Ashburnham Place, TN33 9NF.

The duties that the candidate would undertake will include general physical activities, lifting, and at busy times, coping with a pressurised environment. We would be grateful for your help supplying the following information. Thank you for your assistance.

Applicant First Name	
Applicant Last Name	
Applicant Date Of Birth	
Doctor Title	
Doctor First Name	
Doctor Last Name	
In your opinion, is the applicant fit and mentally stable and able to work hard?	
Has the applicant any present disability	
(e.g. back problems)?	
Give More Details	
Has the applicant ever had a Tetanus vaccination?	
Has the applicant been vaccinated against Tuberculosis?	
Is the applicant currently receiving	
treatment, medication or prescribed drugs of any kind?	
Give more details: When did the	
treatment start? When is the treatment due to finish?	
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Nervous or mental disorder		
Tion vodo or mortal disorder	Yes*	No
Heart trouble	Yes*	No
Any other serious illness	Yes*	No
Allergies	Yes*	No
Any breathing difficulties	Yes*	No

Declaration

Thank you for completing the volunteer medical information form. You will not receive any other direct correspondence from us regarding the applicant. We will communicate with the applicant if we require any further information.

Data on this form will be handled in accordance with our <u>Privacy Policy</u>, Please sign below to confirm you agree with our <u>Privacy Policy</u>, <u>http://catalyst.ashburnham.org.uk/privacy-policy/</u>

	rything written is corre shburnham Place <u>Priva</u>	ny knowledge	
Medical Agreen	nent Signature		
Date			
Date			

RETURN THE COMPLETED FORM:-

By email to catalyst@ashburnham.org.uk

By post to Ashburnham Place Catalyst Volunteer Programme Battle, East Sussex TN33 9NF UK

www.ashburnham.org.uk

Telephone: 0044 (0)1424 892244