

Application Form

On Call Africa (OCA)
Registered Charity SC041546



Personal Details

First Name

Last name

Address

Town / City

Country

Postcode

Phone Number

Email

In an emergency who would you like us to contact?

Name

Telephone

Please tell us about your qualifications

Foundation Year Two (FY2) Complete In Progress Not Started

Medical Qualification MBBCH MBCHB MBBS
 BM Other None

Highest Level of Training Student Junior Doctor Senior Doctor
 Other FY1 GP
 None FY2 Consultant
 GP Training SAS
 Specialist Senior Other
Training
 Junior Other

Additional Experience or Training

Please list any other qualifications or training relevant to the role not already mentioned

Current (or most recent) Employment or Volunteer Role

Name and address of organisation

Position held

Date From

Date To

Brief description of responsibilities

Reason for leaving

Previous employment or Volunteer Role

Name and address of organisation

Position held

Date From

Date To

Brief description of responsibilities

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Name and address of organisation

Position held

Date From

Date To

Brief description of responsibilities

Reason for leaving

Criminal Disclosure

Do you have any convictions, cautions, reprimands, or final warnings that are not “protected” as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013)

No Yes If you answer yes, we will ask you to provide further details separately.

The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are ‘protected’ and are not subject to disclosure to employers and cannot be taken into account. A person’s criminal record will not, in itself, debar that person from being appointed to this post. Any information given will be treated in the strictest confidence. Suitable applicants will not be refused posts because of offences which are not relevant to the role and which do not make them a risk in the role for which they are applying.

Volunteer Declaration

Volunteering as a doctor with On Call Africa is dependent upon obtaining a satisfactory enhanced disclosure from the Disclosure and Barring Service (DBS) as well as several other certified documents to support registration with the Health Professionals Council of Zambia (HPCZ) we will provide further information regarding these documents to all successful applicants.

In accordance with On Call Africa's volunteering policy, you are expected to follow organisational policies and procedures and review the relevant resources provided as part of the role.

In accordance with the Data protection Act 2018, do you agree to give your consent for the information in this form to be processed by On Call Africa for the purpose of volunteering and understand that if you are offered a volunteering role, this application form will become part of your volunteer file and record. If you are not offered a role, it will be stored for three months and then destroyed. Please be assured that we will not share or sell your data.

Do you certify that the information given on this form is correct and that should any false statements or omissions be made; a volunteer role may not be offered.

Please read the declaration above and sign this form to confirm you agree with this declaration.

Signature

Date

Sign up for our email newsletter

Find out about our latest fundraising activities and news in our monthly e-newsletter. You can unsubscribe at any time by clicking the link in the footer of your email.

Would you like to receive our newsletter? No Yes

Thanks for your interest in volunteering

If your application is shortlisted, you will be invited to book onto an interview. If you have not heard from us within two weeks, then unfortunately your application has not been successful.

Please return your application form to: On Call Africa, PO Box 373, Hartlepool, TS24 4GG or by email: info@oncallafrica.org