**Online Pro-forma to be completed – COVID Cleaning Team,**

|  |  |
| --- | --- |
| **Name:** |  |
| **Contact Telephone Number: - Home Telephone** |  |
| **Contact Telephone Number: - Mobile Number** |  |
| **Contact email address:** |  |
| **Home Address:** |  |
| **Current Work Location e.g. School Name** |  |
| **Preferred Shift Pattern (please put YES against preferred shift pattern)** |
| **Full Shift**6.30am to 10.30pm |  | **Part Shift**6.30am to 10.30am |  |  |
|  |  |  |
| **Part Shift**10.30am to 2.30pm |  | **Part Shift**2.30pm to 6.30pm |  | **Part Shift**6.30pm to 10.30pm |  |
| **Tran Transport (please put YES against the correct statement)**  |
| I have my own transport, and would be willing to travel to any polling location  |  |
| I do not have my own transport  |  |
| **Shielding (please put a YES against the correct statement**  |  |
| I am currently shielding |  |
| I am not shielding |  |
| **Date:** |  | **Signed:** |

Please complete and return it to linda.mullin@renfrewshire.gov.uk **as soon as possible, if you wish to volunteer.**

**You will also have received a copy of this proforma in the post.**