

LACHES VOLUNTEER MENTORING TEAM APPLICATION FORM

Section 1.

Mr/Mrs/Miss/Ms/....	First Names:	Surname:
Date of Birth:		Gender: M/F
Home Address:	Tel.No. Home: Work: Mobile:	
What ethnic group do you associate yourself with?		
Are you are parent? Please state gender and age(s):-		
Are you currently employed? If "yes" please state if – Full-time, Part-time, Shift work, other..... If "no" please state if – Retired, Unemployed, other.....		

Section 2.

How did you hear about LACHES Volunteer Mentors? Friend <input type="checkbox"/> Newspaper <input type="checkbox"/> Magazine <input type="checkbox"/> Leaflet <input type="checkbox"/> Social Worker <input type="checkbox"/> Volunteer Centre <input type="checkbox"/> Other (please state).....
Have you/are you involved with any charity/voluntary work? (Please give details)
Why are you interested in becoming a volunteer?

Section 3.

Please describe any experience you have of working directly with children.

Please tell us about your hobbies and interests.

Please tell us about any other skills/experiences which may be useful in this work.

Section 4.

Do you have any medical/health problems? Please specify, giving details of any treatment and/or medication where applicable.

Section 5.

The nature of the work will bring you into direct contact with vulnerable children. We require details of two referees and references will be taken up before you will be able to work with any children involved in this scheme. One must be a professional person, (preferably your current or last employer or tutor), who has known you for at least one year and is not a close friend or family member. The other must be someone who knows you well in either a professional or personal capacity.

<u>Referee 1.</u>	<u>Referee 2.</u>
Name:	Name:
Address:	Address:
Postcode:	Postcode:
Telephone:	Telephone:
How do they know you?	How do they know you?
How long have they known you?	How long have they known you?

Section 6.

The Rehabilitation of Offenders Act 1974

This position is exempt from the provisions of the above Act. You must therefore disclose any criminal convictions, including spent convictions, suspended sentences and bind-over orders.

Have you ever been convicted of a criminal offence? YES / NO

If "yes" please give details here:-

PLEASE NOTE – Disclosures made in Section 6 (above) does not necessarily mean that you will be unable to become a volunteer.

A Criminal Records Bureau form (CRB) is also required and will be given to you for completion during the selection and training stages.

Section 7.

Please use this section to give us any further information which you feel may be of interest to us.

Declaration.

I declare to the best of my knowledge and belief that the information I have given is correct and true.

Signature:.....Date.....