VOLUNTEER APPLICATION FORM

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| Position you have applied for: **Lay Member, Safeguarding Children and Adult Board** |

**Guidance on how to fill in this form**

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| It is important that you fill in this form accurately and thoroughly to give yourself the best chance of getting an interview. | * Read the whole form before you write anything. * Use a black pen or type your answers as we may need to photocopy the form. * Answer every question on the form. * Once you have filled in the form, read your answers and check for errors * Sign the form. Please note that if you have completed and sent this form electronically, you will be asked to sign it if you are invited to an interview. |

**Your details**

|  |
| --- |
| Surname: |
| Initials: |
| Address: |
| Home phone number: |
| Work phone number: |
| Mobile phone number: |
| E-mail address: |

**Other details**

|  |
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| Where did you see this volunteer role advertised? |
| Do you have any prior connection with agencies or elected members working with children within the Borough? This includes both yourself and your family members. If yes, please provide details, including names and dates where relevant. |

**Disability**

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| We want to increase the opportunities for disabled people to work with us. If you have a disability, please tell us if there are any reasonable adjustments we can make to help you carry out this volunteer role. |

**Employment**

|  |  |  |  |
| --- | --- | --- | --- |
| Please tell us about any previous employment you have had. Please start with your present or last employer. If you have just left school or college, please give us details of any holiday jobs you have had. You can also include voluntary or unpaid positions.    Continue on another sheet if necessary. | | | |
| Dates  (month and year)    From To | | Employer's Name and Address | Your position |
| / | / |  |  |
| / | / |  |  |
| / | / |  |  |
| / | / |  |  |
| / | / |  |  |
| / | / |  |  |
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| / | / |  |  |
| / | / |  |  |
| / | / |  |  |

**References**

|  |
| --- |
| Please give details of two referees below. Preferably, one of these should be your present or last employer. If you have not been in employment, please provide details of a voluntary organisation where you have worked or the head of an educational establishment. The other should be someone who has known you in a personal capacity for at least two years (but not a family member or relative). |

|  |
| --- |
| Name of referee: |
| Their position: |
| Their address: |
| Their phone number: |
| E-mail address: |
| How do you know them? |
| How long have you known them? |

|  |
| --- |
| Name of referee: |
| Their position: |
| Their address: |
| Their phone number: |
| E-mail address: |
| How do you know them? |
| How long have you known them? |

**Experience**

|  |
| --- |
| Please use the space below to tell us why you are interested in this volunteer role and about your knowledge, skills and experience from your education, employment and personal life which you think are relevant.    In filling out this section please tell us how you meet the criteria set out in the person specification.    Continue on another sheet if necessary. |
|  |

Please read the following statement and sign the form where indicated.

|  |
| --- |
| The information on this form is correct. I understand that if I tell you something which I know is wrong or misleading, or I do not give you information which is relevant to my application, you may reject my application or, if I am appointed to the position, terminate the appointment. |

Your signature: Date:

**Please note that if you have completed and sent this form electronically, you will be asked to sign it if you are invited to an interview.**

**Equal opportunities policy**

We would like to ensure that all sections of the community have access to opportunities to work with us. To help us monitor whether we are successful, please answer these questions.

Thank you for your help.

**This will not affect your application.**

The volunteer role you have applied for: **Lay Member, Safeguarding Children and Adult Board**

Your date of birth: / /

Do you have a disability? Yes□ No □ Do not wish to specify □

Please describe your ethnic origin. The categories listed below are descent, not country of birth, nationality or citizenship. All the categories include people who were born in the United Kingdom.

|  |  |
| --- | --- |
| White | □ |
| British | □ |
| Irish | □ |
| Other White | □ |
| Do not wish to specify | □ |

|  |  |
| --- | --- |
| Mixed | □ |
| White and Black Caribbean | □ |
| White and Black African | □ |
| White and Black Asian | □ |
| Other Mixed | □ |
| Do not wish to specify | □ |

|  |  |
| --- | --- |
| Asian or Asian British | □ |
| Indian | □ |
| Pakistani | □ |
| Bangladeshi | □ |
| Other Asian | □ |
| Do not wish to specify | □ |

|  |  |
| --- | --- |
| Black or Black British | □ |
| Black Caribbean | □ |
| Black African | □ |
| Other Black | □ |
| Do not wish to specify | □ |

|  |  |
| --- | --- |
| Chinese or Ethnic Group | □ |
| Chinese | □ |
| Other Ethnic Groups | □ |
| Do not wish to specify | □ |

|  |  |
| --- | --- |
| Your Own Definition: |  |
| Are you: Male □ | Female □ Do not wish to specify □ |

Completed application forms should be sent to following address:

Dudley Safeguarding Children and Adult Board

Corbyn Road

Dudley

DY1 2JZ

**Declaration**

**This job is not protected by the Rehabilitation of Offenders Act 1974.**

**You must sign this declaration.**

**The Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Exceptions) Amendment) Order 1986**

This volunteer role is not protected by the above provisions. If we decide to offer you the role, we will ask the Disclosure and Barring Service for details of any convictions, bindover orders, reprimands or cautions you may have. You must tell us about any convictions, bindover orders, reprimands or cautions, including those which for other purposes are ‘spent’ under the Act, before we can officially offer you the role.

Have you ever been convicted of a criminal offence,

bound over, reprimanded

or cautioned?

or are any of these pending? Yes □ No □

If ‘Yes’, please give details:

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............................................................................................................................

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Your signature: ......................................................... Date: ........../........./..........

**If you do not tell us about any criminal offences we may reject your application or, if you are appointed, terminate the appointment.**