

## NEW LEADER'S VOLUNTEERING FORM

### 1. Personal details

Mr / Mrs / Miss / Rev / \_\_\_\_\_ Surname \_\_\_\_\_

First name \_\_\_\_\_ Known as (if different) \_\_\_\_\_

Date of birth \_\_\_\_\_

Occupation or place/subject of study \_\_\_\_\_

Home address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Email address \_\_\_\_\_ Time at current address \_\_\_ Years \_\_\_ Months

Phone numbers **H:** \_\_\_\_\_ **W:** \_\_\_\_\_ **M:** \_\_\_\_\_

Term-time contact details (if different) \_\_\_\_\_

*If you have lived at your current address for less than 5 years, please give details of your previous address(es). Continue on a separate sheet if necessary and ensure a full 5 year period is covered.*

From \_\_\_ / \_\_\_ / \_\_\_ To \_\_\_ / \_\_\_ / \_\_\_

From \_\_\_ / \_\_\_ / \_\_\_ To \_\_\_ / \_\_\_ / \_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tick here if you **don't** want your contact details to appear on an address list, to be distributed amongst members and leaders of the Venture.

### 2. Availability and preferences

If there is a particular Venture you would like to help on, please specify: \_\_\_\_\_

Have you already been in contact with the Overall Leader(s)? **YES / NO**  
(If so, you can forward this form directly to them)

Otherwise, please let us know about your availability and preferences:

Dates available: *from* \_\_\_\_\_ *to* \_\_\_\_\_

Preferred age group(s) to work with: 8-11 11-14 14-18

What particular areas of the Venture would you like to get involved in? (Don't worry if you don't know)

Head cook    Cooks team    Music    Administration    Medical    Giving talks    Craft  
Outdoor activities / games    Swimming / lifesaving    Small group leading    Technology

### **3. What can you offer?**

*The more information you can give us, the more likely you are to find the right Venture and the right role for your gifts and experience.*

How long have you been a Christian?

Please outline briefly your Christian faith, including your journey to faith and how you have grown in your relationship with God.

What recent experience do you have of work with children or young people?

What specific experience do you have of particular activities in youth or children's ministry (e.g. giving short talks, holiday clubs, other residentials, general relational work) ?

Are there other areas in which you are currently seeking to develop your gifts?  
*(There may be opportunities for you to learn from more experienced leaders as you volunteer.)*

Why do you want to volunteer to help on a Venture?

Do you hold any relevant qualifications or practical training certificates? (E.g. PGCE, first aid, food hygiene, pool lifeguard, youth work, social work)

Are you a car driver? **YES / NO** When did you pass your test?  
Do you own a car? **YES / NO** Would you be willing to use it on the Venture? **YES / NO**

Have you any experience of driving a minibus? **YES / NO**

Have you ever had an offer to work with children/ young people declined? **YES / NO**  
If YES, please provide details on a separate sheet.

#### 4. Other information

*Please give anything else which would be helpful for the Overall Leaders to know, e.g. your spouse planning to volunteer as well; your own children whom you plan to bring with you; particular health needs or dietary requirements etc. In particular, please specify if you are a vegetarian.*

#### 5. References

**Please note that we are unable to accept references from relatives. CPAS reserves the right to request additional references where it feels this is appropriate.**

##### Church Reference

*We will contact your church leader for a reference to support your application. If you have recently moved churches, or if you are a student and attend a different church in term-time, please provide details of the church whose leader will be best able to assess your suitability for Ventures.*

Church \_\_\_\_\_

Name and contact details (address, postcode, phone, e-mail if possible) of church leader

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Church role \_\_\_\_\_

**Personal reference** - someone who knows you well and, ideally, has personal experience of your work with children / young people outside of Ventures.

Name and contact details

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Relationship \_\_\_\_\_

**Overseas Reference** *If you have lived outside the UK for more than 12 months during the last 3 years, you must provide contact details for someone who can provide a reference for that period (i.e. a Church leader overseas or a UK based mission agency).*

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Relationship \_\_\_\_\_

## 6. Declaration

This form is strictly confidential and, except under compulsion of law, will only be seen by the staff or members of the Board of CPAS and the overall leaders of the Venture concerned. The information provided will be used for recruitment decisions and to enable CPAS to demonstrate commitment to Safeguarding children.

Ensuring that all volunteers who will have contact with children and young people through Ventures and Falcon Camps complete this declaration is part of the Safeguarding Policy of CPAS. That policy is based on guidelines from the Church of England, the Home Office and the Churches' Child Protection Advisory Service (CCPAS).

You are therefore asked to complete and sign the following Declaration. We may need to see your Birth and/ or Marriage certificate to check names. **If you answer Yes to any of questions 1-5, please give full details on a separate sheet and forward to your Overall Leader.** We will follow these up with you as appropriate.

Because of the nature of the work for which you are applying, this position is exempt from the provision of section 4(ii) of the Rehabilitation of Offenders Act 1974 (Exemptions Order 1975), and you are not entitled to withhold information about convictions which for other purposes are "spent" under the provisions of the Act. You must therefore declare all convictions whenever they occurred. In the event of appointment, any failure to disclose such convictions could result in the withdrawal of approval to work with children and/or young people on a Venture.

1. Have you ever been charged with, cautioned or convicted in relation to any criminal offence, or are you at present the subject of a criminal investigation or pending prosecution? <p style="text-align: right;"><b>YES / NO</b></p>
2. Have you ever been barred from work with children under any provision of an Act of Parliament, by the Independent Safeguarding Authority or have you ever been referred to a Secretary of State? <p style="text-align: right;"><b>YES / NO</b></p>
3. Have you ever been involved in court proceedings concerning a child for whom you have parental responsibility? <p style="text-align: right;"><b>YES / NO</b></p>
4. Has there ever been any cause for concern regarding your conduct with children? <p style="text-align: right;"><b>YES / NO</b></p>
5. To your knowledge have you ever had any allegation made against you, which has been reported to, and investigated by, Social Services and/or the Police? <p style="text-align: right;"><b>YES / NO</b></p>

*As this post involves substantial, unsupervised contact with children, all applicants who are accepted as volunteers will be asked to submit to a criminal records check before the position can be confirmed. You will be asked to apply for an Enhanced Disclosure through the Criminal Records Bureau. If we already have a CRB check for you from a previous year, we will normally treat that as valid for a period of three years from the date of its issue. If you need a new check, we will contact you. As the position is exempted under the Rehabilitation of Offenders Act this check will reveal any details of cautions, reprimands or final warnings, as well as formal convictions. This process is subject to a strict code to ensure confidentiality, fair practice and security of any information disclosed. The CRB Code of Practice and our own procedures are available on request for you to read. It is stressed that a criminal record will not necessarily be a bar to appointment, only if the nature of any matters revealed could be considered to place children at risk.*

*Please be aware details of pending prosecutions, previous convictions, cautions, or bindovers against you will be disclosed along with any other relevant information which may be known to the police, Department of Health, Department for Education, the Independent Safeguarding Authority or Professional Council e.g. Nursing and Midwifery Council.*

*CPAS undertakes to meet the requirements of the Data Protection Act 1998, the Protection of Children Act 1999 and the Criminal Justice and Court Services Act 2000.*

## 7. Parental consent

*If you are under 18 on the day the Venture begins, your parent / guardian must sign here to give consent to your involvement in this Venture. Ignore this section if you are over 18.*

I give consent for my son/daughter to take part in the Venture as a volunteer.

\_\_\_\_\_ Date \_\_\_\_\_

## 8. Confirmation

**Please ensure you have completed all sections of the form** and then sign below and forward to the overall leader.

I confirm that all the information I have given on this form is accurate. I consent to a criminal records check, and have read the information in section 6 regarding this.

\_\_\_\_\_ Date \_\_\_\_\_