PARISH SAFEGUARDING OFFICER – APPLICATION FORM

**REGISTRATION FORM:**  **for voluntary workers with children or vulnerable adults.**

**Diocese of Hereford – Position of Parish Safeguarding Officer**

The PCC is responsible for the acceptance and accreditation of all workers with children or vulnerable adults. We ask all volunteers to complete this form. All information will be held safely and in confidence in accordance with General Data Protection rules.

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| **Section 1: Your personal details** | | | |
| Title |  | | |
| Name |  | | |
| Former Names- if appropriate |  | | |
| Address |  | | |
| Post code |  | | |
| How long have you lived at this address? |  | Please provide your previous address if you have lived here for less than 12 months. | |
| Phone number | Home | | Mobile |
| Email address |  | | |
| If you currently attend a church, which one is it?  Please give details of your previous church if you have moved less than 12 months ago. |  | | |

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| **Section 2: Emergency contact** | | | |
| Please provide contact details for a person we can contact in case of an emergency. | | | |
| Name |  | | |
| Phone Number |  | Relationship to you |  |

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| **Section 3: About your application** | |
| **Education, Training & Qualifications Information**  Please give details of any relevant training and qualifications which you feel equip you to act as the Church Safeguarding Officer. |  |
| **Employment & Voluntary Work Experience**  Please provide a full history (with dates wherever possible) of your working life and including any previous experience in this field. |  |
| **Church Involvement**  Please provide details (with dates wherever possible) of your church involvement (current and previous). |  |
| **Why do you want to volunteer?**  Please tell us why you are prepared to volunteer for this important role and what skills & qualities you think you would bring to the position . |  |
| **Health Information**  Please provide information about any disability or health issue that we should be aware of in order that we can identify what support or reasonable adjustments we can provide for you to undertake volunteering duties safely. |  |

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| **Section 4: References** | | |
| At least 2 references will be sought. Please provide details of referees, who have known you well for several years. Referees must be over 18 and not be family members or relatives. We may follow up references with a phone call. Please get permission from referees. | | |
|  | Referee 1 | Referee 2 |
| Name |  |  |
| Position |  |  |
| Address |  |  |
| Phone |  |  |
| Email |  |  |
| In what capacity do you know this person? |  |  |

**If you have any queries or concerns about this section of the form, please ask!**

I declare the above information is true, accurate and complete to the best of my knowledge. I accept that providing deliberately false information could result in my termination of my role as a volunteer.

I understand that any offer of appointment is subject to satisfactory pre-appointment checks as well as completion of a Confidential Declaration Form and satisfactory disclosure from the Disclosure and Barring Service at the appropriate level, as stated on the volunteer role description.

I understand that if I am appointed to this role there will be a settling in period and that I will be expected to complete the necessary induction programme and undertake all the relevant safeguarding training.

|  |  |
| --- | --- |
| Signed |  |
| Print name |  |
| Date |  |

**Please return the completed form either in person or at the church office in a marked envelope –**

**Confidential: Add in the lead recruiter name here – Rev ??????**