



VOLUNTEER APPLICATION FORM (CONFIDENTIAL)

Thank you for applying to be a volunteer with us. Here at WAM Youth we take safeguarding and child protection very seriously. Therefore, we ask all potential volunteers to complete this application form and we will take up references, conduct an interview and complete a DBS check before a volunteer undertakes any work with young people. Details will be held securely with access restricted to authorised WAM Personnel only in accordance with the Data Protection Act 2018.

SECTION 1: GENERAL INFORMATION

Please tick all volunteer roles you are applying for:

Mentoring Youth Group/Community

Full Name:

Home Address:

Email:

Telephone No:

Alternative Phone No:

Preferred method and time of contact:

Do you hold a full current driving licence?

Does this include D1 / Minibuses?

What days and times are you regularly available to volunteer?

Do you have any relevant qualifications for the role you are applying for (e.g. childcare, first aid or youth work qualifications)?

Building trust and relationships are at the core of the support we offer young people. Please state the minimum term you can commit to being a WAM volunteer? (Please note that for mentoring volunteers a 12 month commitment is required)

How did you hear about volunteering at WAM?

SECTION 2: YOUTH WORK EXPERIENCE (If only applying for *Woodland Maintenance* please skip this section and go directly to Section 3.)

Please give the key reasons why you would like to be involved in youth and/or children's work? If you are applying for mentoring, please expand upon why you would like to specifically support a young person through a 1-1 relationship.

What interests and skills do you have that you could bring to the youth work or mentoring relationship? (e.g. dance, CV writing, woodland skills, tutoring, sports, arts, etc.)

Please outline any relevant experience you have in youth work or mentoring, including training or volunteering:

Are you prepared to undertake further training in relevant aspects of youth and/or children's work? **Yes** **No**

Please specify any particular areas of training you feel would be most relevant:

SECTION 3: REFERENCES

Please give the names and addresses of two Referees who should know you well but are not related to you or each other, i.e. employer, teacher, manager, youth leader, former voluntary work supervisor. At least one must have known you for two years. Please check with your referees that they can respond within ten days of us contacting them to prevent delay.

PROFESSIONAL OR CHARACTER REFEREE

Name:

Organisation (if applicable): Relationship to you:

Email address:

Telephone no:

CHARACTER REFEREE

Name:

Relationship to you:

Email address:

Telephone no:

If you have spent time living or working overseas from the age of 10 (minimum age of criminal responsibility), please complete the overseas section below as we may require additional references for your time spent abroad. The Enhanced DBS check that we ask all staff/volunteers to take does not cover time spent overseas, only whilst living in the UK.

TIME SPENT OVERSEAS

I have spent time living/working overseas (this does not include family holidays). **Yes** **No**

I agree to obtain any necessary documentation with WAM's support, relevant to time spent overseas. WAM will discuss with you what checks are required if you have spent time overseas. **Yes** **No**

Please provide any relevant information below:

	Dates lived/worked there	Already have Criminal records check or certificate of good conduct for this country & time period	Name of a referee who knew you during this time & can vouch for your conduct (we will ask you for contact details later if required)
<i>France (Example)</i>	<i>May 2010 – Oct 2014</i>		<i>Mary Smith</i>

SECTION 4: SELF-DECLARATION (The disclosure of any offence may not prohibit volunteering. If you answer 'Yes' to any of the following questions, please give full details in the additional information section, as we may need to discuss this with you.)

CONVICTION HISTORY

If you have never been convicted of a criminal offence and never received a caution, reprimand or warning then please select 'No' below. If you have an unspent criminal offence, caution, reprimand or warning (according to DBS filtering rules), please select 'Yes' below. **Yes No**

For exceptions to this legislation or for more information please refer to the Rehabilitation of Offenders Act 1974 and the DBS filtering guidance.

Having read the above, do you have any unspent convictions, are you at present the subject of a criminal investigation / pending prosecution? **Yes No**

POLICE INVESTIGATIONS

Have you ever been the subject of a police investigation that didn't lead to a criminal conviction (and is not subject to DBS filtering rules)? **Yes No.**

To your knowledge have you ever had any allegation made against you, which has been reported to, and investigated by, Social Services / Social Work Department (Children's or Adult Social Care)? **Yes No**

Has there been any cause for concern regarding your conduct with children, young people, vulnerable adults? Please include any disciplinary action taken by an employer in relation to your behaviour with adults. **Yes No**

DECLARATION

To help us ensure that we are complying with all relevant safeguarding legislation, please read the accompanying notes and complete the following declaration.

I _____ of

Consent to a criminal records check if appointed to the position for which I have applied. I am aware that details of pending prosecutions, previous convictions, cautions, or bindovers against me may be disclosed along with any other relevant information which may be known to the police.

I agree to inform the person within WAM Youth responsible for processing disclosure applications if I am convicted of an offence after I take up my volunteer role within WAM. I understand that failure to do so may lead to the immediate suspension and / or termination of my volunteer work with children.

I agree to inform the Safeguarding Lead if I become the subject of a police and / or a social services (Children's Social Care) / Social Work Department investigation. I understand that failure to do so may lead to the immediate suspension of my voluntary work with children and / or the termination of my voluntary work with WAM Youth.

I confirm that I am not barred from working with children or vulnerable adults. I also confirm that I am in agreement with and will work towards achieving the aims of the youth work of WAM Youth.

Signed:

Date:

Please use this space for any additional information: