



Somerset County Union / Association
Children and Young People Safeguarding Policy and Procedures

SLCGA

Appendix 1

Volunteer / Staff Job Application Form

Position Applied for:
<p>Personal Details</p> <p>Title: Mr/Mrs/Miss/Dr/Other (please specify) _____</p> <p>Full Name: _____</p> <p>Any previous surname: _____</p> <p>Date and place of birth: _____</p> <p>National Insurance Number: _____</p>
<p>Present Address: _____</p> <p>_____</p> <p>Post Code: _____</p> <p>Telephone Numbers: _____</p> <p>Email address: _____</p>
<p>Current Occupation: _____</p> <p>Name and address of Organisation: _____</p> <p>_____</p> <p>Role: _____</p> <p>Start Date: _____</p>

Relevant Experience including any previous experience of working with children and young people:	
Reasons for applying:	
References: Please provide the names and addresses of two people who know you well (one personal, one professional – current or previous employer, who are not related to you) whom we can contact to obtain a reference:	
Name: Address: Telephone Number:	Name: Address: Telephone Number:

Data Protection Notification:

Information you have provided in completing this form will be used to process your application. SCLGA will keep the information you have supplied confidential and will not divulge it to third parties, except where required by law, or where we have retained the services of a third party representative to act on your/our behalf.

Authorisation:

I have read the Data Protection notification and understand and agree to the use of my personal data in accordance with the Data Protection Act 1998.

Signed:**Date:****Declaration:**

I confirm that the information I have provided is correct and that any false or misleading information may lead to the termination of my appointment.

Signed:**Date:**