

# Detling Summer Conference

7<sup>th</sup> – 12<sup>th</sup> August 2010

## Fast-track Volunteer Application Form Children's, Youth & Special Needs Team

[to be used for applicants who served at Detling in 2009]

### Personal Details

Title: \_\_\_\_\_ Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Home Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

**Choice of Team** : (Please delete as appropriate) 0-4s / 5-7s / 8-11s / 12-14s / 15-18s  
Special Needs

**Church Referee's Contact Details** (Your church referee must be your minister, vicar, elder or a senior church leader, who has known you for at least 6 months and must not be related to you)

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone no: \_\_\_\_\_ Email (preferred) \_\_\_\_\_

How long has your referee known you and in what capacity? \_\_\_\_\_

Minister's/Pastor's Details (if different from above): Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Changes

\*This position is exempt from the Rehabilitation of Offenders Act 1974, and you are required to disclose all convictions, cautions, reprimands or final warnings, including those that have become spent. For motoring convictions please only answer yes if it resulted in disqualification. (Please note: A criminal record does not necessarily exclude you from working with us. Each case will be treated individually).

Please state here any changes to your circumstances since your 2009 application (ie medical conditions, criminal convictions\* etc).

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**Accommodation Details:**

Are you planning to camp on-site? ( **Yes / No** )

If so, is there a Church group you would like to camp with? \_\_\_\_\_

What will you be bringing with you? (Please tick as appropriate)

**Caravan**[  ] **Awning**[  ] **Motor Home**[  ] **Trailer Tent**[  ] **Large Tent**[  ] **Small Tent** [  ]

**Hook Up**[  ] (please note charge of £6 per night).

**Skills and Experience** [Please provide a copy of any relevant certificates]

Please tell us about,

a) Any artistic, dramatic, musical skills you would be able to contribute. \_\_\_\_\_

b) Any current first aid, medical qualifications or training in first aid for infants, any experience/training in administering an epi-pen. \_\_\_\_\_

c) Have you had R.Fire/PWL Child Protection Training?\_\_\_\_\_When?\_\_\_\_\_

Please provide details of your previous experience for the role you have applied for, including special needs or children’s work (including copy certificates, if applicable) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CRB Check.**

**Please Note:** Volunteers for Children’s, Youth and Special Needs Teams need to have an **annual CRB check.**

**Declaration**

I confirm that I have read and fully understood the duties of the Detling Volunteer in the job description sent and agree to abide by the procedures laid down by the leadership team. I agree that as a volunteer my primary concern is to serving with my team. I declare that to the best of my knowledge the information I have given is true and accurate and I consent to this information being retained by People Without Limits; for the referees named to be contacted and for the information given in this form to be disclosed to them. I also consent to further checks being made with the relevant authorities if necessary.

Signed \_\_\_\_\_ Dated \_\_\_\_\_

**Please return your completed form to: People Without Limits, 2<sup>nd</sup> Floor Suite, Turkey Court, Turkey Mill, Ashford Road, Maidstone ME14 5PP**

**NB: All application forms must be accompanied by one passport size photo**