**APPLICATION FOR CHAPERONE LICENCE**

Children and Young Persons Act 1933

The Children (Performances & Activities) (Wales) Regulations 2015

Please complete in **Block** Capitals

(Mr/Mrs/Miss/Ms) SURNAME: ………………………………………………….. FORENAMES: ……………………………………………………

ADDRESS: .………………..………………………………………………………………………………………………………………………………………………. ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………POSTCODE ……………………………………………………...

Home Tel number: ……………………….. Work Tel Number:………………………………. Mobile Number:………………………………...

OCCUPATION ……………………………………………………………………………. DATE OF BIRTH …………………………………………………….

EMAIL: …………………………………………………………………………………………………………………………………………………………………………

**Experience & Qualifications**

Have you previously applied for Chaperone approval if YES, please provide the name of the Local Authority applications were made to?

Do you have any relevant qualifications applicable to working with children e.g . teacher, teaching assistant, nursery worker, youth worker etc?

Please state your experience in the care, control and supervision of children:

Do you have a First Aid Qualification?

Do you have a Full UK Driving Licence?

**NB: if you do use your own vehicle to transport children you must ensure that you have appropriate business use insurance and that you comply with all relevant legislation.**

**Health Information**

**Do you have any health and/or physical conditions that might restrict YES NO**

**your ability to act as a Chaperone?**

If yes, please give details

**Disclosure & Baring Service checks**

**Due to the nature of the work you are seeking approval for, we need to know if you have ever been convicted of a criminal offence, including traffic offences. Please complete the following as appropriate and give details as required.**

I have not been convicted of any offences

I have been convicted of the offences outlined below

Date: Court: Offence: Outcome:

**Have you ever been known to Social Services in Vale of Glamorgan or another local authority?**

**Yes**  **No**

If yes, please give details

I hereby give permission for Vale of Glamorgan Council to carry our checks with other local authorities and other Vale of Glamorgan Council departments including social services as part of the approval of a chaperone licence

 **YES**  **NO**

**References**

**Please provide two references (not family members or friends ) who have known you for more than 2 years and are prepared to answer an enquiry as to your suitability to carry out the duties of a Chaperone. One of these should be a recent employer.**

1. Name 2. Name

Address: Address:

Postcode: Postcode:

Telephone Number: Telephone Number:

Email (Preferred method of contact): Email (Preferred method of contact):

Context in which known : Context in which known:

Do you intend to work professionally as a Chaperone receiving payment other than expenses? Yes No

**Declaration:**

I apply to the City of Vale of Glamorgan Council for approval as a Chaperone for Children in entertainment under the Act and Regulations. I consent to reference checks and a Disclosure and Barring Service check being carried out. I hereby declare that the above information is true, to the best of my knowledge. I understand that I will be liable to prosecution if I willfully state anything I know to be false or do not believe to be true.

Should you omit to disclose relevant information that is later discovered by this Council  this could result in your licence being suspended or revoked therefore please answer all questions truthfully and provide as much information as possible.  The information provided may be confirmed with other local authorities and other Vale of Glamorgan departments, subject to your agreement to the same.

Please note if you do not give permission for us to request safeguarding information from other local authorities or internal Vale of Glamorgan departments you will be invited to meet with us to explain why you have withheld permission and this may result in your application not being successful.  This information is crucial when considering your ability and suitability to care for children in line with The Children (Performances & Activities) (Wales) Regulations 2015 and Children and Young Persons Act 1933/63 Act.

Signed: …………………………………………………………………… Print Name:……………………………………………………………….

Date:………………………………………………………………………..

Data Protection

The information you have provided will be processed by Vale of Glamorgan Council under the Data Protection Act 2018, in line Article 6 (1) (e) if the General Data Protection Regulation to perform a specific task in the public interest, that is set out by law. The information provided to us will be treated as confidential but may be used by the Council or disclosed to other when required by law.

As part of your application, reference checks and a Disclosure and Barring Service check will be carried out. The licences of successful applicants will be shared with other Local Authorities where appropriate.

In Signing the below, I understand that I will be liable to prosecution.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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