



APPLICATION FOR APPROVAL
AS CHAPERONE



CHILDREN & YOUNG PERSONS ACT 1963
CHILDREN (PERFORMANCE) REGULATIONS 1968
CHILDREN (PROTECTION FROM WORK) REGULATIONS 1998
CHILDREN (PERFORMANCES) (MISCELLANEOUS AMENDMENTS) REGULATIONS 1998

Note: This form and the Disclosure Application form should be completed in ink and returned with two passport sized photographs to **Catherine Saunders, Education Welfare Service, P.O. Box 56, Civic Centre, Silver Street, Enfield, Middlesex, EN1 3XQ.** You will also be required to attend a meeting at the Civic Centre to provide identification documentation.

| | |
|--|---------------------|
| Mr/Mrs/Miss/Ms Surname _____ | First Names _____ |
| Previous Surname _____ (if applicable) | Date of Birth _____ |
| Address _____ | |
| _____ Postcode _____ | |
| Telephone no. Home _____ | Work _____ |
| Previous Address (if you have lived here less than 5years) _____ | |
| _____ Postcode _____ | |

| | |
|--|------------------|
| Name & Address of Current Employer _____ | |
| _____ | |
| Position Held _____ | Start Date _____ |

| | |
|---|-------|
| <u>Professional Qualifications</u> | |
| Have you previously been approved as a Chaperone? If yes, for which Local Authority? | _____ |
| Are you a registered child minder or foster carer? Please give brief details | _____ |
| Have you ever received first aid training? Please give details | _____ |
| Are you a qualified teacher or nurse? Please give details i.e. registered numbers. | _____ |
| Are you the owner/employed at a dancing/dramatic school? If yes, please give name, address and your position within the school. | _____ |

| | |
|--|-------------------------|
| Do you have a valid UK Driving Licence? | YES/NO |
| Does your car insurance allow you to carry passengers whilst employed as a chaperone? | YES/NO |
| Do you have a physical or mental disability that may limit your performance in the job as chaperone? If so, what can be done to accommodate your limitation? | _____ _____ _____ |
| Have you received any Safeguarding Child Protection training? If yes, please give details | _____ _____ |
| Would you be interested in attending a Safeguarding & Child Protection course? | _____ _____ |

Due to the nature of the work you will be carrying out, we need to know if you have ever been convicted of a criminal offence (including traffic offences), or if you have had an allegation made against you, or been the subject of a child protection case conference. Please fill in the form provided.

Do you have a current Criminal Record Bureau certificate of Enhanced Disclosure?

Yes No CRB is out of date No Never had a CRB check.

Have you studied the “Duties of a Chaperone” list and agree to fulfil these duties? YES/NO

From time to time producers/agencies ask for the names and addresses of registered Chaperones who may be willing to chaperone children in their productions.

Would you be happy for me to pass your details on to them?

Yes No

Please give the names, addresses, titles or qualifications of three responsible persons (not partner/relatives) who are prepared to answer any enquiry as to your suitability by character and temperament to carry out the duties of chaperone. One of these persons should be a recent employer. If you are renewing your licence you do not need to fill this section in.

Reference 1

Name _____

Occupation _____ Telephone _____

Address _____

City/Town/County _____ Postcode _____

Relationship _____

Reference 2

Name _____

Occupation _____ Telephone _____

Address _____

City/Town/County _____ Postcode _____

Relationship _____

Reference 3

Name _____

Occupation _____ Telephone _____

Address _____

City/Town/County _____ Postcode _____

Relationship _____

I hereby declare that the information I have provided is true, to the best of knowledge. I understand that I would be liable to prosecution if I wilfully stated anything, which I knew to be false, or did not believe to be true.

Applicant's signature Date

The London Borough of Enfield follows the All London Child Protection Procedure. It has a duty to safeguard & promote the welfare of all children. Please read the leaflet enclosed with this application





Education Welfare Service
London Borough of Enfield
Civic Centre
Silver Street
Enfield
Middlesex EN1 3XA
Telephone 020 8379 3438
Fax 020 8379 3337

I _____ (Chaperone's Name) Date of Birth _____

Address _____

I HAVE/DO NOT HAVE (delete) A CRB ENHANCED DISCLOSURE. I DO NOT HAVE ANY CONVICTIONS PREVENTING ME FROM WORKING WITH CHILDREN. I HAVE NOT RECEIVED ANY CRIMINAL CONVICTIONS IN THE PAST YEAR, NOR HAVE I BEEN INVOLVED IN ANY ACTIVITIES OR INVESTIGATIONS THAT MIGHT LEAD TO A CRIMINAL CONVICTION.

DECLARATION TO BE SIGNED BY THE APPLICANT

I HEREBY DECLARE THAT THE ABOVE INFORMATION IS TRUE, TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT I AM LIABLE TO PROSECUTION IF I WILFULLY STATE ANYTHING I KNOW TO BE FALSE OR DO NOT BELIEVE TO BE TRUE.

SIGNED

DATED

EQUALITIES & DIVERSITY MONITORING FORM

NOTE

This will be separated from your application form.
The information provided will only be used for monitoring purposes.

Please put a tick in the box to the category that you feel best describes your ethnicity.

| Ethnic Classification | | | |
|--|--|---|------------------------|
| Category | Sub Category | Code | Response Column |
| White | <input type="checkbox"/> British | 01 | |
| | <input type="checkbox"/> Irish | 02 | |
| | <input type="checkbox"/> English | 03 | |
| | <input type="checkbox"/> Scottish | 04 | |
| | <input type="checkbox"/> Welsh | 05 | |
| | <input type="checkbox"/> Greek or Greek Cypriot | 09 | |
| | <input type="checkbox"/> Turkish or Turkish Cypriot | 10 | |
| | <input type="checkbox"/> Any other White background – please specify | 19 | |
| | Mixed | <input type="checkbox"/> White & Black Caribbean | |
| <input type="checkbox"/> White & Black African | | 22 | |
| <input type="checkbox"/> White & Asian | | 23 | |
| <input type="checkbox"/> Black & Asian | | 24 | |
| <input type="checkbox"/> Black & Chinese | | 25 | |
| <input type="checkbox"/> Black & White | | 26 | |
| <input type="checkbox"/> Chinese & White | | 27 | |
| <input type="checkbox"/> Any other Mixed background - please specify | | 28 | |
| Asian or Asian British | | <input type="checkbox"/> Indian or British Indian | 41 |
| | <input type="checkbox"/> Pakistani or British Pakistani | 42 | |
| | <input type="checkbox"/> Bangladeshi or British Bangladeshi | 43 | |
| | <input type="checkbox"/> Other Asian & British Asian – please specify | 44 | |
| | <input type="checkbox"/> Mixed Asian – please specify | 45 | |
| Black or Black British | <input type="checkbox"/> Caribbean | 61 | |
| | <input type="checkbox"/> African | 62 | |
| | <input type="checkbox"/> Other Black & Black British – please specify | 63 | |
| | <input type="checkbox"/> Mixed Black – please specify | 64 | |
| Other Ethnic Groups | <input type="checkbox"/> Chinese | 81 | |
| | <input type="checkbox"/> African not previously defined-please specify | 82 | |
| | <input type="checkbox"/> Middle Eastern – please specify | 83 | |
| | <input type="checkbox"/> Arabian | 85 | |
| | <input type="checkbox"/> Any other Ethnic Group – please specify | 85 | |
| Refusal | <input type="checkbox"/> I refuse to declare this information | 90 | |

| | | |
|--|--|--|
| GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female | How did you find out about becoming a Chaperone? <input type="checkbox"/> Enfield Council Website <input type="checkbox"/> A local agency <input type="checkbox"/> Production Company <input type="checkbox"/> Friend <input type="checkbox"/> Other Please specify | CODE 1 2 3 4 5 |
| AGE <input type="checkbox"/> 18-24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45-54 <input type="checkbox"/> 55-59 <input type="checkbox"/> 60-64 <input type="checkbox"/> 65+ | | |