

APPLICATION FOR CHAPERONE'S APPROVAL

"The Licensing Authority must not approve a person as a chaperone unless it is satisfied that the person is suitable and competent..."

(Regulation 15(4) The Children (Performance and Activities) (England) Regulations 2014)

"Any person who knowingly or recklessly makes any false statement in or in connection with an application for a licence ... shall be liable on summary conviction to a fine not exceeding £1,000, or imprisonment for a term not exceeding three months or both."

(Children and Young Persons Act, 1963, Part II, Section 40)

All information given in this application form will be treated in confidence, with the exception of information relating to criminal offences. Please complete this form in type or BLOCK CAPITALS.

APPLICATION TO _____ COUNCIL

SURNAME		MR/MRS/MISS/MISS/DR
FIRST NAMES		
DATE AND PLACE OF BIRTH		
ADDRESS, including full post code		
PHONE NUMBERS		
E MAIL		
HOW LONG AT THIS ADDRESS		
IF LESS THAN FIVE YEARS, PLEASE LIST ALL PREVIOUS ADDRESSES DURING THAT TIME		
PRESENT / LAST EMPLOYER & TYPE OF WORK		
ADDRESS		
PROFESSIONAL QUALIFICATIONS		
Have you ever before been approved as a chaperone? Have you ever been refused a chaperone licence? Are you a registered child minder or foster carer? If yes to any of these, please give details and the name and address of the relevant Local Authorities.		

Due to the nature of the work, we need to know if you have ever been convicted of a criminal offence, including any traffic offences. A Disclosure & Barring Service check will be undertaken as part of the registration process. For the purpose of registration as a chaperone, nothing is considered spent and everything must be declared. Please tick the appropriate box below, and give details as needed.

<input type="checkbox"/>	I have not been convicted of any offences		
<input type="checkbox"/>	I have been convicted of the offences shown below:		
DATE	COURT	OFFENCE	RESULT

Your name will appear on a list of the LA's approved chaperones, unless you indicate otherwise. Do you agree to your name being placed on the list? Y/N

If your application is approved, do you wish for your details to be given to agencies seeking to employ chaperones? Y/N

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 would be liable to prosecution if I wilfully stated in my application anything which I know to be false or do not believe to be true.

SIGNED

DATE

This form, along with a DBS form attainable from the address below, should be completed & returned, together with two passport sized portrait photographs to:

Child Employment & Licensing Officer
ACE Team,
3rd Floor
145 King Street
London W6 9XY

For Office Use Only

	Date Received	Date Sent	Date Returned
Form ID Proof of Address Photo		--	--
Cheque & Amount			--
DBS (& Ref No.)			
References	--	1. 2.	1. 2.
Outcome			