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| APPLICATION TO RENEW 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.

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| APPLICATION TO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNCIL |
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| --- | --- | --- |
| SURNAME |  | MR/MRS/MISS/MISS/DR |
| FIRST NAMES |  |
| DATE AND PLACE OF BIRTH |  |
| ADDRESS (including full post code) |  |
| PHONE NUMBERS |  |
| EMAIL |  |
| ISSUED DATE OF ORIGINAL LICENCE |  |
| EXPIRY DATE OF MOST RECENT LICENCE |  |
| HAVE YOU BEEN REGISTERED DISABLED IN THE LAST 3 YEARS? | **YES / NO** |
| HAVE THERE BEEN ANY CHANGES IN YOUR HEALTH OVER THE LAST 3 YEARS WHICH MAY HAVE BEARING ON YOUR RENEWAL APPLICATION? |  |

Due to the nature of the work, we need to know if you have ever been convicted of any criminal offences in the last 3 years, including any traffic offences. Please tick the appropriate box below, and give details as needed.

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| --- | --- |
|  | I have not been convicted of any offences |
|  | 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** |
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|  **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**

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| --- | --- | --- | --- |
|  | Date Received | Date Sent | Date Returned |
| Form&Photo |  | -- | -- |
| Cheque & Amount |  |  | -- |
| DBS (& Ref No.) |  |  |  |
| Outcome |  |  |  |