Volunteer Pyramid Club Leader Application Form

|  |  |  |
| --- | --- | --- |
| Name | Age – tick box | Gender |
| 18-25 | 25-65 | 65+ |
| If you have used any other names please specify |
| Home address (all applicants) | TelephoneMobileEmail |
| Term Time Address (Students only) | College |
| Course title, year |
| Name, school name and school year of any dependent children under age 16.Give details of any skills, hobbies or interests you may have that could help in running a Pyramid Club for children aged 10+. |
| Have you had any experience of working with children on a paid or voluntary basis or as a parent/carer? If so, please give details.Continue on a separate sheet if necessary. |
| Where did you hear about this volunteering opportunity? |
| Ethnic background  |
| White | BritishIrishTraveller of Irish HeritageGypsy/RomaAny other White background | [ ] [ ] [ ] [ ] [ ]  |
| Mixed | White and Black CaribbeanWhite and Black AfricanWhite and AsianAny other mixed background | **[ ]** **[ ]** **[ ]** **[ ]**  |
| Asian or Asian British | IndianPakistaniBangladeshiAny other Asian background | **[ ]** **[ ]** **[ ]** **[ ]**  |
| Black or Black British | CaribbeanAfricanAny other Black background | **[ ]** **[ ]** **[ ]**  |
| Chinese |  | [ ]  |
| Any other ethnic background |  | [ ]  |
| I do not wish an ethnic background category to be recorded | [ ]  |

|  |
| --- |
| **References** *(Please give the names of 2 people to whom you are not related, who have preferably known you for more than two years and are over 18. No more than one of these should be a personal friend. Please ensure your referees are aware that they will be contacted.)* |
| **Referee 1:****Name****Address****Telephone Day****Telephone Eve****In what capacity do they know you?** | **Referee 2:****Name****Address****Telephone Day****Telephone Eve****In what capacity do they know you?** |
| **Do you have any spent or unspent convictions or cautions or are you the subject of current police enquiries or pending prosecutions?** **Yes** **[ ]  No[ ]** *(If answering ‘Yes’, you will have the opportunity to discuss the matter at interview. Any information given will be kept confidential, and will not necessarily exclude you from being considered for the role of club leader.)* |
| **Disability****Are you aware of any physical or mental conditions that potentially could affect you as a club leader?****Yes** [ ]  **No****[ ]** *(If your answer is 'yes' we do not require any further details now but we would like to discuss this at interview)***Please describe any special requirements you would have if appointed as a club leader:** |
| **Applicant’s signature.** | **Date** |
| **Thank you for completing this form. Please return to:**Mrs S Strother, Pyramid Club, LSA Technology & Performing Arts College, Worsley Road, Lytham St Annes, FY8 4DG |
| For office use onlyCriminal records check processed allocated to: |