

EMPLOYMENT OF CHILDREN IN PUBLIC ENTERTAINMENT APPLICATION FOR APPROVAL AS CHAPERONE

**(Before filling in this application form, please read the criteria for the role of**

**Chaperone – attached as an appendix to this document)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name in full:** |  | **DOB:** |  |
|  |  |  |  |
| **Permanent Address:** |  |
|  |
|  | **Postcode:** |  |
|  |
| **Telephone Numbers:** |  | **NI no:** |  |
|  |
| **e-mail:** |  |
|  |
| **Names of Local Authorities to which previous applications have been made:** |
|  |
|  |
|  |  |
| **Dates of such applications and if granted or not:** |  |
|  |
| **Do you have a valid Enhanced DBS (if not a DBS must be obtained**  |  |
|  |
| **Please provide a colour copy of your Enhanced DBS with this application via email or in person to County Hall Offices in Ruthin.** |
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|  |
| **Have you read the ‘Duties of Matron/Chaperone’ which accompanies this**  |
|  **Application form and do you agree to fulfil these duties?** |  |
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|  |  |

**Please include 2 colour passport style photos or alternatively email a picture (jpeg) in passport style to the email address provided.**

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| --- |
| **Please give the names and addresses of two people who are prepared to provide a reference for your suitability to carry out the duties of Chaperone** **Please read the notes below before completing the names and addresses** |
| The referees **must**  |
|  | be a recent employer or a professional person. For example, bank or building-society officials, police officers, civil servants, ministers of religion and people with professional qualifications like teachers, accountants, engineers and solicitors. |
|  |
| The referees **must** |
|  | have known you personally for at least two years |
|  | live in the UK  |
|  |
| The referees **must not:**  |
|  | be related to you by birth or marriage (including in-laws or partners of family members) |
|  | be in a personal relationship with you  |
|  | live at your address or |
|  | be an acquaintance, neighbour or parent of a child attending a dance/drama group |

|  |  |  |
| --- | --- | --- |
| 1. | **Name:** |  |
|  |  |  |
|  | **Address:** |  |
|  |  |  |
|  | **Email** |  | **Postcode:** |  |

|  |  |  |
| --- | --- | --- |
| 2. | **Name:** |  |
|  |  |  |
|  | **Address:** |  |
|  |  |  |
|  | **Email** |  | **Postcode:** |  |

I hereby certify that the above particulars are correct.

I confirm this photo is the person making an application for a Chaperone badge.

I understand that the Licensing Authority may interview me to assess my suitability as a Chaperone.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |

|  |  |
| --- | --- |
| **Please return to:** | **Education and Children’s Services****Denbighshire County Council****PO BOX 62****Ruthin****LL15 9AZ**  |

**Email**  **education@denbighshire.gov.uk**

This information will not be shared with any other third party unless the law requires us to do so. For further information about how we handle personal information, please visit [www.denbighshire.gov.uk/privacy](http://www.denbighshire.gov.uk/privacy)