|  |
| --- |
| **To be completed by Applicant** |
| Parish: |
| Full Name: |
| D.O.B: |
| Address: |
| Tel. No: |
| Email: |
| Type of Ministry/Role: |

If the role involves working with children/vulnerable adults and if the person named on this form is **not known** to the Priest(s) or a member of the Parish Safeguarding Personnel, the names and contact details of two people who are not relatives of the volunteer should be provided for reference purposes, **applicant to complete section A**

If the role involves working with children/vulnerable adults and if the person named on this form **is known** to the Priest(s) or a member of the Parish Safeguarding Personnel and he/she is willing to provide their name as a referee for references purposes. In this instance **PP/Safeguarding Parish Personnel complete section B**

**Section A Section B**

The volunteer is known to:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Priest / member of Parish Safeguarding Personnel

I believe that he/she has the requisite skills and experience to fulfil the role.

This person is of good standing in this parish and I have no hesitation in accepting him/her for the role.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PP/CC

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| ***Referee 1:*** | |
| Name: |  |
| Address: |  |
| Tel No: |  |
| Email: |  |
| ***Referee 2:*** | |
| Name: |  |
| Address: |  |
| Tel No: |  |
| Email: |  |

**To be completed by PP/CC**

The volunteer is unknown to the Priest(s)/member of the Parish Safeguarding Personnel and having checked with the referees named above, I believe that he/she has the requisite skills and experience to fulfil the role.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PP/CC

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_