

Annexe H

APPLICATION FORM

For Voluntary Workers with
Vulnerable Adults



CONFIDENTIAL
**The Diocese of
Canterbury**
**THE CHURCH
OF ENGLAND**

When you have completed this form, please return it to:
(to be filled in by the parish before giving the form to the applicant).

The position you are applying for may be subject to a Criminal Records Bureau
Enhanced Disclosure

Position for
which you
are volunteering

PERSONAL DETAILS

Surname

Title

First names

Date of Birth

Address

Post code

Home telephone

mobile

Email

Any other name(s)
by which you have
been known

Length of time at above address

If less than five years, please give previous address and previous church attended

Previous experience of caring for, or working with vulnerable adults

Any relevant qualifications or training

REFERENCES

Please give the names and addresses of two people you have known for at least two years who would be willing to provide a personal reference. At least one of them should have experience of your ability to work with the vulnerable.

Referee 1

Referee 2

Name:

Address:

Email:

Tel:

I confirm that the above information is accurate and complete to the best of my knowledge. I agree to complete a Confidential Declaration and to obtain a disclosure from the Criminal Records Bureau (if required).

Signed: _____ Date: _____