ADULT VOLUNTEER APPLICATION FORM SG01-ACH

CONFIDENTIAL

(See Relevant Sections of Safeguarding Children Policy and Procedures)

Ministry:			
Parish/Centre:			
Surname:	First Name:		
Address:			
Date of Birth: Te	lephone No.(s) _		
email:		-	
Are you (please tick)			
Employed Unemploy	yed	Student	
Homemaker Retired		Other	
Current & Previous Work Experience			
Have you previously been involved in voluntary	y work or Church	n ministry?	
Yes No			
If Yes, please give details			
Why do you want to get involved in this minist			
Have you previously received any training for v	working with chil	ldren / young pe	ople? Yes No
If Yes, please give details.			
			_

Diocese of Achonry: Safeguarding: Adult Volunteer Form SG01-ACH

Adult Volunteer Application	Form (Cont. SG01-ACH p. 2.)
Have you previously received any C	Child Protection training? Yes No
If Yes, please give details.	
Yes No	why you may not be deemed suited to carry out this work?
Any other relevant infor	rmation?
Please provide the names and addressor a reference (not relatives).	esses of two people whom the diocese / parish / centre can contact
Name:	Name:
Address:	
Tel No:	Tel. No:
email:	email:
I declare that the information is true	e and that I am fit to serve as a
Signed:	Date:
Diocesan / Parish / Centre Use On	aly
Date Form Received:	Date Ref. Forms Sent:
Date Ref 1 Received:	Date Ref 2 Received:
References Received By:	
Status of Application:	Invited to take up ministry: Yes / No (please circle)
Signed:	Date: