

**Lincolnshire County Council
Children and Young Persons Act 1963
Children (Performances and Activities)(England) Regulations 2014**

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**APPLICATION FOR APPROVAL AS A CHAPERONE FOR
CHILDREN IN ENTERTAINMENT**

(PLEASE NOTE: As several checks need to be made we cannot guarantee a clear timescale for issuing chaperone licence. However as a rough guide applications should be made at least 12 weeks before the date it is needed)

Type of Chaperone Licence	
Please indicate which type of chaperone licence you are applying for:	
Professional Chaperone	
Volunteer Chaperone	
Personal Details	
Title (Mr, Mrs, Miss, Ms):	
Full Name:	
Address:	
Postcode:	
How long have you been at this address? If less than 5 years, please list all previous addresses during that time – use another sheet if necessary	
Daytime telephone number:	
Email address:	
Date of Birth:	
National Insurance No.:	

Name of theatre/dance school/organisation you are currently connected to:	
Name and address of your current or most recent employer:	
Postcode:	
Date Employment Started / Ended (delete as applicable):	
Relevant Experience	
Please give details of any experience you have of working with children (e.g. teaching, social work, youth work, child minding, playgroup, cubs, brownies)	
Briefly outline what you consider to be the duties of a chaperone:	
Have you previously been approved as a chaperone? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, date of approval and for which authority	
Date	Authority
We may contact the other authority in addition to your two references.	
We maintain a centralised list of approved chaperones for Lincolnshire County Council, which is available to organisations looking to recruit chaperones.	
Do you agree to your name being placed on the list? Yes <input type="checkbox"/> No <input type="checkbox"/>	
References	

Below please give names, addresses and phone number of two responsible persons who would be prepared to give you references as to your suitability to be a chaperone.

At least one of these should know you in a professional capacity. Please state in what capacity the person is known to you. You must have known them for at least two years and **they must not be related to you.**

1st Referee

Title (Mr, Mrs, Miss, Ms)

Name

Address

Postcode

Telephone No

Email

Capacity known to you

2nd Referee

Title (Mr, Mrs, Miss, Ms)

Name

Address

Postcode

Telephone No

Email

Capacity known to you

Criminal Convictions – Rehabilitation of Offenders Act 1974

Lincolnshire County Council aims to promote equality of opportunity for all with the right mix of talent, skills and potential. Criminal records will be taken in to account for chaperoning purposes only when the conviction is relevant. Having an unspent conviction will not necessarily bar you from chaperoning; this will depend on the circumstances and background of your offence(s). All applicants will be subject to a criminal record check from the Disclosure and Barring Service before a chaperone licence is issued. This will include details of cautions, reprimands or final warnings, as well as convictions. This means that **you are required to declare any convictions, cautions or reprimands which you may have either in UK or abroad, even if they would otherwise be regarded as 'spent' under this Act, and any prosecutions pending against you.** Failure to disclose this information could result in the chaperone licence being refused or revoked by the local authority and may lead to criminal proceedings.

I have read the above notes on Criminal Convictions and agree to a Disclosure Check of Police Records being made. Please tick as appropriate:

I have had an allegation made against me.	
I have been convicted of the offences shown below.	
I have not had an allegation made against me.	
I have not been convicted of any offences	

If you answered 'Yes', you need to give details of: the nature of the offence; the place where the offence occurred; the name of the court which gave the conviction and the penalty imposed.
 You must include details of spent convictions, including those related to juvenile offences.
Please note that the exemption under the Rehabilitation of Offenders Act 1974 does not apply

Please continue on an additional sheet as necessary; if so please tick this box

Date of offence									
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Details:

Are you aware of any other circumstances that might affect your suitability to be a chaperone?	Yes	No

If you have answered 'Yes' please give details below:

Enhanced Disclosure and Barring Service

As part of the application process you will be required to submit an application to the Disclosure and Barring Service (DBS). If you already have a current Child Workforce Enhanced DBS certificate you may not have to apply for a new one if it meets the below criteria:

1. The certificate has been registered with the DBS online service
2. You are employed by LCC or a LCC maintained school and can demonstrate continuous service since it was issued
3. The certificate has been issued within 3 months of the date the application is received

If your Enhanced certificate meets the above criteria, please submit a copy with this application.

If you do not have a current or relevant clearance by the DBS you will be contacted after you completed the compulsory online chaperone training regarding making a new application to the DBS.

Once notified that you need a new DBS application, you are required to make an appointment to bring in evidence of your identity. Please note that after your DBS application is submitted your certificate will be posted to your home address. It is then your responsibility to send it to us. If we do not hear from you within 1 month of receiving your certificate, your application will be destroyed.

DECLARATION TO BE SIGNED BY APPLICANT

I hereby declare that the above information is true, to the best of my knowledge. I understand that I would be liable to prosecution if I have wilfully stated in it anything which I know to be false or do not believe to be true. I understand that any application will be subject to satisfactory references, assessments and criminal record checks. Any misleading statement or deliberate omission may disqualify my application. I consent to the necessary enquiries and checks being undertaken by Lincolnshire County Council in order to confirm that the information included in this application form is correct, to verify the authenticity of my qualifications and to check whether I have any relevant criminal record which might make me unsuitable for the role of chaperone. I also agree that other relevant checks may be carried out as necessary.

Signed

Date

This form should be returned (together with 1 passport size photograph - please write your name on the back of the photograph) to:-

Lincolnshire County Council
Child Employment Team
First Floor

Municipal Buildings
West Street
Boston
Lincolnshire
PE21 8QR

CEE@lincolnshire.gov.uk
www.lincolnshire.gov.uk