

Note:

Group 1: Must have DBS and Barring check

Group 2: Must have DBS check

Group 3: No checks

## Job Description

**Role:**

**Group:**            **Workforce (Child/Adult):**

Church Councils must agree duties and conditions with each volunteer.

Complete the form for each group you wish the volunteer to work with. This agreement should also be reviewed at least annually. Copies should be held by the group leader, the safeguarding officer and the volunteer

**Church**

LOUGHTON METHODIST

**Name**

**Safeguarding Requirements (Delete as appropriate)**

- Application Form (FC2)
- Personal Declaration (FC3)
- Certificate from the Declaration and Barring System
- Volunteer Safeguarding Declaration
- Clearance from the Churches Agency for Safeguarding

**Name of group/club (eg Junior Church/luncheon club for disabled people)**

**Location**

**Day and Time**

**Frequency**

**Age range of children and young people under 18 and description of vulnerabilities**

**Duties and Responsibilities (5-10 points)**

**Person to who directly responsible/supervising (eg youth leader / church community worker / Minister)**

**The appointing Body to whom the group is responsible (eg Church Council)**

CHURCH COUNCIL

**What training is planned this year**

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**What training is to take place (usually within a year)**

- Creating Safer Places Foundation Course
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**Who is responsible to arrange for training (ensuring it takes place)?**

The Applicant and Safeguarding Officer

**Date/Month when this role description is to be reviewed (ie towards the middle and end of a probationary period)**

**Training and review planning**

**1. What training is now required?**

**Creating Safer Places Foundation Course  
(within the first year if not already completed)**

**2. Further training**

**Contact your training officer, district training secretary or safeguarding officer for details of training opportunities. Your Minister or circuit steward will be able to provide other details**

**Signed in behalf on the Church Council or other appointing body**

**To be completed by the applicant with Children / Young people / adults**

**I have understand the nature of the work I am to do. I know that I will be required to read the Church Safeguarding Policy and undertake training produced by the Church for safeguarding children and young people and adults who may be vulnerable. I understand that it is my duty to protect children, young people and adults who may be vulnerable with whom I come into contact.**

**Signed:**

**Date:**

**A COPY OF THIS FORM WILL BE RETAINED IN A SECURE AND CONFIDENTIAL MANNER BY THE METHODIST CHURCH**