**The Friendship Project for Children**

**Older Friend Application Form**

 **Explanatory notes**

* Filling in and returning this form does not commit you to becoming one of our volunteers. You will only become committed when you have freely agreed to become an Older Friend to a specific child. Before completing this form, you should ensure that you have the name, telephone number, email address and the consent of two character references that you have known for over a year.  Your references should ideally be professional. If this is not possible, a personal reference should be from a long standing friend, and not a direct relative or partner/spouse.
* All the information you give will be treated as confidential.
* We need this information for two reasons. Firstly, we have to establish your suitability, and this is why we ask for references, and your agreement to Disclosure and Barring Service (DBS) and Children’s Services checks. We have to be extremely careful when giving anyone responsibility for a child and we also have to meet certain Legal obligations. Secondly, some of the information you provide may help us to achieve a suitable ‘match’ with a Younger Friend.
* After we have obtained the references. we will arrange a Briefing so you can learn more about the Project and how it operates. This is provided on a one-to-one basis and will take about 2 hours.
* We will help you complete the Disclosure Application Form for obtaining your Enhanced DBS and Children’s Services checks. If you are likely to use your house when taking out a Younger Friend, then we need to carry out these checks on all adults living at your house. University volunteers will agree **not** to use their homes or accommodation. We will also discuss at the Briefing your preferences regarding a Younger Friend.
* We have a duty of care to do what is best for all parties, in particular to safeguard the children in order for the partnership to be a success. We undertake rigorous checks on all applicants, and reserve the right to refuse applications on any number of grounds, at any stage, if we feel there is a justified reason to do so. This will be communicated to you by the Line Manager at the earliest opportunity. We ask that you be respectful to our staff at all times during the process and understand that we have a duty of care to protect our staff and the children within our care at all times.  If you are advised that your application will not be taken forward and wish to appeal this decision, please contact our Chair of Trustees who will investigate the matter accordingly (contact details can be found on our website).

Please complete the application form on the next two pages. When completed please return this form to: -

Karen Hoy – Project Administrator

Friendship Project

C/O Simon & Dean Ltd

Brickyard Lane

Studley. B80 7EE

Telephone: 0845 838 2098

karen.hoy@friendshipproject.co.uk

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| **The Friendship Project for Children****Older Friend Application Form** |
| **Title (Mr, Mrs, Miss, Ms, Other)** |  |
| **Forename (s)** |  |
| **Surname** |  |
| **Full address (including post code)** |  |
| **Home telephone number** |  |
| **Mobile telephone number** |  |
| **Email address** |  |
| **Emergency contact details** | **Name:** **Relationship to you:** **Telephone:**  |
| **Your present occupation** |  |
| **Have you ever volunteered for anyone else? Please provide details** |  |
| **Do you have the use of a car?** |  |
| **Do you have any police convictions? Please provide details, even if spent** |  |
| **Do you have any dependants under the age of 18?** |  |
| **DBS checks** | ***Our project involves working with children, so we must take the utmost care with our selection of volunteers.  Do you agree that we can make a check on DBS to satisfy Government and other regulations? There is no cost to you for this.******Please circle:*** ***YES NO*** |
| **Please explain in a few words why you would like to work for the Project** |  |

|  |  |
| --- | --- |
| **Please give details of any of your leisure or other interests that may interest a child** |  |
| **What skills or experience do you have that may make you suitable for this role?** |  |
| **Where did you hear about us?** |  |

We ask the following three questions for monitoring purposes, and to ensure that we are attracting a diverse volunteer base.

|  |  |
| --- | --- |
| **Ethnicity** |  |
| **Gender** |  |
| **Age range (please circle)** |  18-25 26-35 36-45 46-55 56-65 Over 65 |

Please provide the details of two character references that you have known for over a year. Your references should ideally be professional. If this is not possible, a personal reference should be from a long standing friend, and not a direct relative or partner/spouse.

|  |  |
| --- | --- |
| **First character reference** | **Second character reference** |
| **Full name** |  | **Full name** |  |
| **Telephone** |  | **Telephone** |  |
| **Email address** |  | **Email address** |  |
| **In what capacity do you know them?** |  | **In what capacity do you know them?** |  |
| **For how long have you known them?** |  | **For how long have you known them?** |  |

**Privacy Notice**

**How your information will be used**

The Friendship Project for Children will not share your personal information with any external organisations or companies, other than specifically in relation to the volunteer or child within the matching process where it will be necessary to interface with the referring professional of the Younger Friend. The latter, we may also share with statutory bodies who are authorised to request this information. Additionally, in the event of any case studies being used these will be appropriately anonymised. We will retain the volunteer and child information in secure storage and on our secure database for up to 50 years, as required historically by our insurers.

For further information on how your information is used, how we maintain the security of your information and your rights to access information we hold on you, please contact our Project Administrator on 07516 527714 or karen.hoy@friendshipproject.co.uk

**Communication**

We will communicate with you by email, post and telephone as is necessary.

**Declaration**

By signing this form you confirm that you understand and agree to our Privacy Notice. You are also opting in to get information from us.

**Signed**………………………………………………………………………....….**Date**…………………..………………………………………………..………….