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| Open | Application Form for aVolunteer Working withChildren or Vulnerable Adults |

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| Name of the church | Application for the role of |
| Full name of applicantDate of Birth | Previous experience of working with childrenor vulnerable adults |
| Former name (if any) |
| Home addressPostcodeTelephone (day)Telephone (evening) |
| How long have you livedat the above address? | Continue overleaf if necessary. |
| **This box is only to be completed if you have livedat the above address for less than 12 months**Previous addressPost codeHow long there?Church attendedName of minister | Please provide two references, one of which must be from current employer or previous churchNameAddressPostcode Tel-----------------------------------------------------------NameAddressPostcode Tel  |
| Relevant training or qualifications (if any) | SignedDate |