

## **Chaperone licence application form**

**CHILDREN AND YOUNG PERSONS ACT 1933/1963 CHILDREN (PROTECTION AT WORK) REGULATIONS 1998** 

CHILDREN (PERFORMANCES) (MISCELLANEOUS AMENDMENTS) REGULATIONS 1998 THE CHILDREN (PERFORMANCE AND ACTIVITIES) (ENGLAND) REGULATIONS 2014 \*The licensing authority must not approve a person as a chaperone unless it is satisfied that the person is suitable and competent...\* (Regulation 15(4)(a) The Children (Performance and Activities) (England) Regulations 2014) All information given in this application form will be treated in confidence. Please complete this form in ink and block capitals. Mr/Mrs/Miss/Ms **Surname** First name **Previous surname** Date of birth (if applicable) **Address Postcode** Previous address (if you have lived at your current address for less than five years) Telephone number **Mobile** number **Email** Name and address of current employer Position held Start date Name of production for which you require this licence Name of production **Production** company / amateur date dramatic group Please tick to indicate in what capacity you are applying to become a chaperone:

☐ - I will be working as a chaperone on a professional ☐ I am working as a chaperone on a voluntary basis. basis and will be receiving payment for the work I undertake and will not receive any form of payment in this capacity. I agree that any DBS check will be paid for either by myself or the company that I am to be employed by

Professional qualifications			Yes/No	Further details		
Have you pre-	viously been approved as a Ch al Authority?	naperone? If yes,				
Are you a registered child minder of foster carer for North Yorkshire Council?						
Have you ever received first aid training? Please give details						
Are you a qualified teacher or nurse?						
Do you have a valid UK driving licence?						
Does your car insurance allow you to carry passengers whilst employed as a chaperone?						
Please give details of any other relevant work experience (IRUH DP St) teaching, social work, youth work, play groups) or if you have acted in a voluntary capacity such as Cubs/Brownies. Please also add anything else that you feel would be relevant to this application. You may continue on another sheet if needed.						
Due to the nature of the work you will be carrying out, we need to know if you have ever been convicted of a criminal offence (including traffic offences), or if you have had an allegation made against you, or been the subject of a child protection conference. Please tick the appropriate boxes below, and give details as needed.						
			I have not had an allegation made against me or been the subject of a child protection case conference			
below				an allegation made against me/been of a child protections case		
DDM	Court	Offence		Result		

Please give the details of two responsible persons, who would be prepared to comment as to your suitability by character and temperament to carry out the duties of Chaperone. One of these must know you in a professional capacity for example, current/previous employer. A family member cannot act as a referee. Please provide an email address for each referee, as where possible, we will request the references by email.

1. Name

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1.	Name						
Email address:							
	Address:						
	Postcode:						
	Telephone:						
	Relationship:						
2.	Name						
	Email address:						
	Address:						
	Postcode:						
	Tel:ephone:						
	Relationship:						
	ittelationship.						
Declaration to be signed by applicant							
Lho	roby doclare that the infer	mation contained in this applicati	on is true, to the best of my knowledge.				
1116	Teby declare that the infor	nation contained in this applicati	on is true, to the best of my knowledge.				
Sig	ned:		Date:				
The information detailed in this application form will be used in order to fulfil our statutory obligations under the Acts detailed at the start of the application. Your information may be disclosed to agencies wishing to use your services as a chaperone.  Please tick this box if you <b>DO</b> wish your details to be disclosed to other groups or organisations for chaperone work							
Checklist							
Plea	ase tick to confirm that you	ı have completed the tasks below	<b>/:</b>				
I confirm that I have applied online for an Enhanced DBS check (previously known as CRB Disclosure) and have taken my proof of identification documents to be verified by a member of North Yorkshire Council.							
Please note: DBS Clearance will need to be renewed every five years for Chaperone purposes.							
For pre-existing Enhanced DBS clearance certificates, only certificates issued within the last five							
years, showing North Yorkshire County Council / North Yorkshire Council as the Registered Body and including a check to the 'Children's Barred List' can be accepted.							
- I confirm that I have completed the online NYSCB Safeguarding Children course (certificate enclosed)							
N.B. if your pre-existing course certificate is over 3 years old the course must be re-taken.							
- I have read the following documents: The Children (Performance and Activities) (England) Regulations 2014 (with specific reference to Part 3(15 and 29). The table of New Regulations (NNCEE) and Examples of Best Practice Child Performance.							
	This form should be returned together with a photograph (head and shoulders) and a copy of your Safeguarding Children course certificate to:						
	Email: <a href="mailto:chaperonelicences@northyorks.gov.uk">chaperonelicences@northyorks.gov.uk</a> Tel: 01609 533080 School Improvement Team, Room SB110, South Block, County Hall, Northallerton, DL7 8AE						