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| Open | Application Form for a Volunteer Working with Children or Vulnerable Adults |

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| Name of the church | Application for the role of |
| Full name of applicant  Date of Birth | Previous experience of working with children or vulnerable adults |
| Former name (if any) |
| Home address  Postcode  Telephone (day)  Telephone (evening) |
| How long have you lived at the above address? | Continue overleaf if necessary. |
| **This box is only to be completed if you have lived at the above address for less than 12 months**  Previous address  Post code  How long there?  Church attended  Name of minister | Please provide two references, one of which must be from current employer or previous church  Name  Address  Postcode Tel  -----------------------------------------------------------  Name  Address  Postcode Tel |
| Relevant training or qualifications (if any) | Signed  Date |