Chaperone’s Licence Checklist

Included in your licence application should be

1. Birth Certificate or Passport or Driving licence
2. Appropriate Enhanced DBS Disclosure
3. Recent utility bill showing name and address
4. 2 passport sized photographs
5. Signed declaration
6. 2 References (Please note we cannot accept references from family members) References need to evidence suitability to Safeguard children during performances.

NB we can only accept by email the application form and photographs to childlicence@sthelens.gov.uk. Personal documents will need to be seen at your agreed appointment.

Appointments are required to process chaperone’s licence applications. This is due to the personal nature of the documentation. Please contact to arrange your appointment Telephone 01744 673356.

Updated August 2021


##### Education Welfare Service

# Application for chaperone approval

## 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), The Children (Performances and Activities) (England) Regulations 2014)***

|  |  |  |  |
| --- | --- | --- | --- |
|

|  |
| --- |
| Name of Group(s) Associated With: |
| (E.g., Theatre Group, Drama Group, Operatic Group, Dance School etc.)  |

 |  |
| Surname |  |
| Maiden Surname (if applicable) |  |
| Title  |  |
| Forenames |  |
| Gender |  |
| Date of Birth |  |
| AddressPostcode |  |
| How long have you lived at this address |  |
| Tel No |  |
| Email |  |
| National Insurance Number |  |

1. **Additional Information**

|  |  |  |
| --- | --- | --- |
| **Question** | **Yes** | **No** |
| Have you ever been approved as a Chaperone/Matron? If so, when and by which Authority? |  |  |
| Are/were you a registered child minder or foster carer? If so, when and with which Authority?  |  |  |
| Have you received first aid training? If so, provide copy of certificate or details of training provider and dates for verification purposes. |  |  |

1. **Qualifications**

Please give details of any relevant qualifications (in the box provided below) that will make you suitable to undertake this role. There is an expectation you will already have completed safeguarding training. If not, this can be provided (at a cost).

|  |  |  |  |
| --- | --- | --- | --- |
| **Qualification**  | **Grade** | **Date Completed** | **Organisation** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. **Experience**

Please provide examples of relevant experience below:

|  |
| --- |
|  |

1. **Professional capacity?**

What category of Chaperone are you?

|  |  |  |
| --- | --- | --- |
| **Category** | **Yes**  | **No** |
| Voluntary Chaperone |  |  |
| Professional Chaperone |  |  |

**5. References**

Please attach to this document two recently dated references to endorse your application (in relation to working with children) and provide the details of the two referees below.

|  |  |
| --- | --- |
| Name: | Name: |
| Address: | Address: |
|  |  |
|  |  |
| Tel: | Tel: |
| Relationship to applicant: | Relationship to applicant: |

Please give the details of your current/most recent employer:

|  |  |  |
| --- | --- | --- |
| Are you currently employed? | Yes | No  |
| Date of last employment  |  |
| Name of employer/organisation |  |
| Address |  |
| Telephone Number |  |
| Contact name |  |

**6. The rehabilitation of offenders Act**

The Rehabilitation of Offenders Act allows for a person who has been convicted of a criminal offence involving a sentence of not more than

2 ½ years imprisonment and who has since lived trouble free for a specified period of time (related to the severity of the offence) to be treated as if the offence, conviction or sentence never occurred. This is known as a spent conviction.

The position for which you are applying is one of those to which the provisions of the above Act in relation to spent convictions do not apply. You must, therefore, disclose whether you have any previous convictions, including if they are spent. Should you disclose a criminal conviction, this will be discussed with you in confidence. However, you should note that only convictions that are relevant to the position in question will be considered.

Do you have any criminal convictions (whether spent or unspent), cautions, reprimands, final warnings, or prosecutions pending?

 **Yes / No Please delete as appropriate)**

**If YES, please give details:**

## 7. Application procedure

Please contact the office below to arrange appointment for the application.

Please bring along the fully completed application form along with following original documents for identification purposes.

* Two Recent Passport Size Photographs
* Enhanced Disclosure
* Birth Certificate
* Passport or Photo Driving Licence
* Recent utility bill/bank statement with proof of address
* Two references

NB. Further information about the disclosure Scheme can be found at www.disclosure.gov.uk.

Education Welfare Service

childlicence@sthelens.gov.uk

Tel no: 01744 673356

Please note: In order for this application to be processed you must have an up to date enhanced DBS disclosure.

**8**. **Declaration**

1. I confirm that the information given is correct and true. I understand that if I give false information or withhold relevant information, it could result in my application being rejected or my licence being withdrawn, if approved.
2. I am also prepared to uphold the Children (Performance and Activities) (England) Regulations 2014 to ensure that the welfare, safety and kind treatment of children under my care are put before the needs of the production company.
3. I am aware and understand Safeguarding Children’s Procedures.
4. I will keep any records as required by the regulations and understand that I would be obliged to report any concerns or breaches of the regulations including accidents to the local authority who issued my licence and if necessary, the child’s licensing authority.

The Local Authority reserves the right to review the licence during its period of validity, e.g. A visit during a performance or change of circumstances review.

1. If I am issued with a Chaperone Licence, I understand that I must inform the local Authority within 7 days of any relevant change in circumstances.
2. Any change of name or address.
3. Any serious or notifiable illness or debility.
4. Any arrest for any offence, or any conviction in a Court of Law whether in the United Kingdom or not.

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

**Children (Performances 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), The Children (Performances and Activities) (England) Regulations 2014)***

**(Chaperone’s Reference)**

|  |  |
| --- | --- |
| Reference for (applicant name) |  |
| Referee name:  |  |
| Position: |  |
| Address: |  |
| Daytime Telephone Number . |  |
| Email address: |  |
| How long have you been acquainted with the applicant? |  |
| In what context do you know the applicant? |
| **This applicant (if approved) would be solely responsible for the welfare/Safeguarding of up to 12 children (age 0 - 16 years) potentially, in an unknown environment. The applicant needs to be equal to the task of challenging any risk/unsafe practice, which may be evident. Please base your comments on the applicant’s suitability with the safeguarding and welfare of children. Please be as comprehensive as possible.** |
| Please supply the reasons; you think this person will be suitable to safeguard children during a performance. |
| Have you any further comments that may contribute to a decision about certifying the applicant as suitable to chaperone children? |

**Signature:**

**Date:**