**Application for Approval to Chaperone Children**

**Employed in Entertainment**

The Children & Young Persons Act 1963

The Children (Performances & Activities) (England) Regulations 2014

When applying to become a licensed chaperone you are seeking to be in Regulated Activity since it involves unsupervised work with children. Under Section 7 of the Safeguarding Vulnerable Groups Act 2006 it is an offence to apply for this role if you are barred from engaging in Regulated Activity with children. You must be aged 21 or over to become a licensed chaperone.

The application form together with a digital photo (headshot only) will need to be submitted to the child employment mailbox child.employment@towerhamlets.gov.uk. You will also be required to provide the following documents as proof of identity in person, at an agreed time with the child employment office. Only original copies will be accepted.

**Documents**

* Two documents as proof of residency - Local Authority (LA) council tax bill for the current council tax year together with a utility bill (gas, electric, satellite television, landline phone bill) issued within the last three months.
* Passport or Driving License.

**Interview/References**

You will be invited to attend an interview once the application form and the required documents have been received. The outcome of the interview will determine your suitability to chaperone children in entertainment. You will not be issued with a chaperone licence if the outcome of your interview is not successful. The panel will provide feedback and recommend a pathway for improvement.

The LA will proceed to contact your two referees’ if the outcome of your interview is successful. Two references must be provided prior to the issuing of your licence.

**Enhanced Disclosure & Barring Service**

You will be required to complete an enhanced check (child workforce) via the Disclosure and Barring Service (DBS). You will need to obtain your enhanced DBS certificate via Tower Hamlets LA. Please contact Tower Hamlets Human Resources Team via hr.dbs@towerhamlets.gov.uk to request for an enhanced DBS check for a chaperone licence.

You must register on the DBS Update Service within 30 days of the issue date on your enhanced certificate. A consent form will be sent to you for authorisation for the LA to check the status of your certificate. If you already obtain an enhanced DBS certificate and you’re currently registered on the DBS update service, then a check via the LA may not be required at this time. You will need to provide a copy of your original enhanced DBS certificate and authorise the LA to complete an online check.

**Training**

It is mandatory for all applicants to complete chaperone and safeguarding training prior to the issuing of their chaperone licence. Course details will be provided once the application has been successful. If you have already completed the training, please provide a copy of your certificate.

|  |
| --- |
| **Applicant Details** |

|  |  |
| --- | --- |
| **Title:**  | Choose an item. |
| **Forename(s):** | Click or tap here to enter text. |
| **Surname:** | Click or tap here to enter text. |
| **Previous names:** | Click or tap here to enter text. |
| **Date of Birth:** | Click or tap to enter a date. |
| **Full Address with post code:** | Click or tap here to enter text. |
| **Number of years at this address:** | Click or tap here to enter text. |
| **If less than five years, please list previous addresses for the previous five years:** (Use a separate sheet if necessary) | Click or tap here to enter text. |
| **Telephone No / Mobile:** | Click or tap here to enter text. |
| **Email:** | Click or tap here to enter text. |
| **Enhanced DBS Certificate Number:** | Click or tap here to enter text. |
| **Are you signed up to the DBS Update Service?** | Choose an item. |
| **Name of Group(s) Associated with:** (E.g., Theatre Group, Drama Group, Operatic Group, Dance School etc.)  | Click or tap here to enter text. |
| **Reasons for applying to become a matron / chaperone:** | Click or tap here to enter text. |
| **Type of Licence required:** |  |

|  |
| --- |
| **Education History** |

|  |  |  |
| --- | --- | --- |
| **School** | **Dates** |  |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

|  |
| --- |
| **Employment History** |

**Provide details of your employment history since leaving school and explain any gaps.**

|  |  |
| --- | --- |
| **Name of current/most recent employer:** | Click or tap here to enter text. |
| **Address:** | Click or tap here to enter text. |
| **Type of work/Position held:** | Click or tap here to enter text. |
| **Start date of employment:** (MM/YYYY) | Click or tap here to enter text. |
| **End date of employment:** (MM/YYYY) | Click or tap here to enter text. |
| **Reason for Leaving:** | Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Name of current/most recent employer:** | Click or tap here to enter text. |
| **Address:** | Click or tap here to enter text. |
| **Type of work/Position held:** | Click or tap here to enter text. |
| **Start date of employment:** (MM/YYYY) | Click or tap here to enter text. |
| **End date of employment:** (MM/YYYY) | Click or tap here to enter text. |
| **Reason for Leaving:** | Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Name of current/most recent employer:** | Click or tap here to enter text. |
| **Address:** | Click or tap here to enter text. |
| **Type of work/Position held:** | Click or tap here to enter text. |
| **Start date of employment:** (MM/YYYY) | Click or tap here to enter text. |
| **End date of employment:** (MM/YYYY) | Click or tap here to enter text. |
| **Reason for Leaving:** | Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Name of current/most recent employer:** | Click or tap here to enter text. |
| **Address:** | Click or tap here to enter text. |
| **Type of work/Position held:** | Click or tap here to enter text. |
| **Start date of employment:** (MM/YYYY) | Click or tap here to enter text. |
| **End date of employment:** (MM/YYYY) | Click or tap here to enter text. |
| **Reason for Leaving:** | Click or tap here to enter text. |

**If there are any gaps in your employment history, please explain below:**

|  |
| --- |
| Click or tap here to enter text. |

|  |
| --- |
| **Qualifications** |

**Any qualifications relating to work with children, or to performing arts:**

|  |  |  |
| --- | --- | --- |
| **Qualification** | **Date** | **Awarding Body** |
| Click or tap here to enter text. | Click or tap to enter a date. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap to enter a date. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap to enter a date. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap to enter a date. | Click or tap here to enter text. |

**If qualified as a teacher give your TRN No. or provide a copy of your certificate if qualified as a youth worker:**

|  |
| --- |
| Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Do you hold a First Aid Certificate?** |  |

**If 'Yes' please provide a copy of the certificate together with the training date and awarding body:**

|  |  |
| --- | --- |
| **Date** | **Awarding Body** |
| Click or tap to enter a date. | Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Have you undertaken Safeguarding/Child Protection training in the last three years?** |  |

**If 'Yes' please provide a copy of the certificate together with the training date and awarding body:**

|  |  |
| --- | --- |
| **Date** | **Awarding Body** |
| Click or tap to enter a date. | Click or tap here to enter text. |

|  |
| --- |
| **Experience** |

**Experience of paid or voluntary work with children (use a separate sheet if necessary):**

|  |
| --- |
| Click or tap here to enter text. |

**Experience of theatre, film, TV, or modelling work for yourself, or supervising a child (use a separate sheet if necessary):**

|  |
| --- |
| Click or tap here to enter text. |

**Drawing on your skills and experience provide a supporting statement on why you would be an effective Chaperone for Children employed in Entertainment:**

|  |
| --- |
| Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Have you previously been approved as a chaperone?** |  |

**If 'Yes' please provide the dates and the name of the Authority:**

|  |
| --- |
| Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Have you previously been refused an application as a chaperone?** |  |

**If 'Yes' please provide the dates and the name of the Authority:**

|  |
| --- |
| Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Have you been approved as a registered child minder or foster-parent?** |  |

**If 'Yes' please provide the date, name and address of the Social Services Department which registered you:**

|  |
| --- |
| Click or tap here to enter text. |

|  |
| --- |
| **Health** |

|  |  |
| --- | --- |
| **Are you registered as a disabled person?**  |  |

**If 'Yes' please state your registration number:**

|  |
| --- |
| Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Do you have any health problems or disability that could affect you in working as a chaperone?** |  |

**If 'Yes' please enclose a letter from your GP or specialist stating that you can look after children working in entertainment.**

|  |
| --- |
| **Travel** |

|  |  |
| --- | --- |
| **Do you have a full current Driving Licence?** |  |

|  |  |
| --- | --- |
| **Do you have any penalty points?** |  |

**If 'Yes' please provide the details:**

|  |
| --- |
| Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Does your car insurance cover you to carry passengers in connection with your business?**  |  |

**If you are not sure, check with your insurers. If the car is insured for business use but you are not the main driver or you named different employment in your original application, make sure that you are covered for transporting children within your care for employment purposes (i.e., chaperoning), if you intend to use your car for this purpose.**

|  |
| --- |
| **Reference** |

**Please give the names, email addresses and occupations of two people who are willing to provide a reference as to your suitability to be a chaperone. One of them must be a current employer if it involves work with children or a previous employer if that involved work with children. The referees must be known to you in a professional capacity rather than a personal capacity. References from volunteer work you are engaged in are acceptable.**

|  |  |
| --- | --- |
| Employment Referee |  |
| Title: | Choose an item. |
| Name: | Click or tap here to enter text. |
| Address: | Click or tap here to enter text. |
| Email: | Click or tap here to enter text. |
| Telephone No: | Click or tap here to enter text. |
| Occupation: | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Employment Referee |  |
| Title: | Choose an item. |
| Name: | Click or tap here to enter text. |
| Address: | Click or tap here to enter text. |
| Email: | Click or tap here to enter text. |
| Telephone No: | Click or tap here to enter text. |
| Occupation: | Click or tap here to enter text. |

|  |
| --- |
| **Consent** |

|  |  |
| --- | --- |
| **If approved, do you agree to your details being put on a list of Local Authority approved Chaperones that may be given to amateur groups and dance schools?** |  |

|  |  |
| --- | --- |
| **On occasion Tower Hamlets is, asked if we can supply companies with the names of our registered chaperones. I hereby give permission for my name, email, and telephone number to be given to productions seeking Local Authority approved chaperones.** |  |

|  |  |
| --- | --- |
| **I hereby give permission for Tower Hamlets to carry our checks with other Local Authorities and other Tower Hamlets departments including Social Care Services as part of the approval of a chaperone licence.** |  |

|  |  |
| --- | --- |
| **We also require permission to disclose your name to other local authorities, schools, production companies and parents when we send a copy of the child’s performance licence.** |  |

|  |
| --- |
| **Declaration** |

**Declaration to be signed by the applicant.**

I hereby declare that the above information is true to the best of my knowledge. I understand that I would be liable to prosecution if I have wilfully stated in it anything which I knew to be false or did not believe to be true.

|  |  |
| --- | --- |
| **Your Signature:** | Click or tap here to enter text. |
|  | Signature |
| **Date:** | Click or tap to enter a date. |

The information you have provided on this form will be held by the London Borough of Tower Hamlets in accordance with the General Data Protection Regulation. By completing and submitting this form you are consenting to your information being processed for the purposes of becoming an approved chaperone. You may withdraw your consent for the processing of your information, which will also mean the withdrawal of your application for approval as a chaperone, at any time by contacting the Pupil Services Team within the Local Authority. Your information may be shared with other council departments as part of the processing of your application. Your information will be kept by the Local Authority for 4 years after your application has been processed. You also have a right to complain, object to or access the information that is held and processed about you. Please see the Council’s website for further details on contacting the Complaints and Information Team.

*"The Licensing Authority must not approve a person as a chaperone unless they are satisfied that the person is suitable and competent"*

*(Regulation 15(4)(a), Children (Performances & Activities) (England) Regulations 2014).*

*“Any person who knowingly or recklessly makes any false statement in or in connection with an application for a licence shall be liable on summary conviction to a fine not exceeding £1000, or imprisonment for a term not exceeding three months, or both.”*

*(Children and Young Persons Act, 1963, Part 11, Section 40)*