



NATIONAL YOUTH ADVOCACY SERVICE

APPLICATION FORM FOR THE ROLE OF VOLUNTEER INDEPENDENT VISITOR

Please read the Role Description before you complete this form. Please complete this form in black ink

Personal Details

Surname:

First name(s):

Date of birth:

National Insurance no:

Address:

Telephone number(s)

Email address:

Please tell us how and when you would prefer us to contact you:

Details of present or most recent employment

**Please note that your employment status does not affect your application to become an IV; however we have restrictions on recruiting volunteers who are connected to
..... (please complete) Social Services.**

Employer's Name & Address:

Job Title:

Dates employed:

References

In order to become a volunteer Independent Visitor with NYAS you must be able to provide the name and contact details of two referees, one professional and one personal, both of whom have know you for a minimum of two years, and are able to comment on your suitability to fulfil this role.

Referee Details:

Name:

Name:

Address:

Address:

Contact Number(s):

Contact Number(s):

Relationship to applicant:

Relationship to applicant:

Reason for Interest

Please tell us why you are interested in becoming a volunteer Independent Visitor; and give brief details of any relevant life skills or experiences which you consider would help you in the role:

Please continue on a separate sheet if necessary.

Rehabilitation of Offenders 1975

The nature of the role you are applying for is exempt from the provisions of the Rehabilitation of Offenders Act (Exemption Order) 1975. You are therefore not entitled to withhold information about convictions which for other purposes are considered "spent" under the revision of the Act.

Have you have ever been convicted for a criminal offence? YES/NO

If you answered "YES" to the above, please provide details of the offence(s), date(s) and where convicted:

Availability

Please tell us about any commitments you have that we will need to consider in making arrangements for interviews and training:

Declaration

I declare that the information I have provided in this form is true and complete. I understand that if it subsequently discovered that any statement I have made is false or misleading; my volunteer appointment will be terminated by NYAS.

Signed:

Dated:

Please Note:

Appointments as volunteer Independent Visitors are subject to satisfactory references, Enhanced Criminal Record Bureau Checks and satisfactory completion of the NYAS IV Training Course.

Thank you for taking the time to complete this form, please return it to:

**Freda O'Hare
National Youth Advocacy Service
Egerton House
Tower Road
Birkenhead
Wirral
CH41 1FN**