



FLEUR-DE-LYS YOUTH F.C.

FOUNDED 1967
Affiliated to Hampshire Football Association
An F.A. Charter & Community Standard Club



APPLICATION FORM

Position Applied for: _____

Reasons for Applying: _____

Title: _____ First Name: _____

Surname: _____

Any previous names by which you may have been known
(including first names, surnames and maiden names):

Address: _____

_____ Postcode: _____

NB. Post Code MUST be completed

Telephone Number: Daytime: _____ Evening: _____

Mobile: _____ E-Mail Address: _____

Date of Birth: _____

Former Address: (if moved within the last three years)

_____ Postcode: _____

Current Occupation/Job Title: _____

Name of Organisation: _____

Organisation Address: _____

_____ Postcode: _____

Telephone Number of Organisation: _____

Previous Voluntary Work

Name of Organisation: _____

Start Date: _____ Finish Date: _____



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State Reasons for Leaving: _____

Relevant Experience: _____

Previous experience of working with young children in a voluntary or professional capacity

Qualifications: Academic/Vocational: _____

Sporting: _____

National Insurance Number: _____

Are you a Member of The F.A. Coaches Association? Yes/No

If Yes – Membership No: _____

Name and Address of two people who know you well (but are not related to you) who have knowledge of your working with children whom we can contact for a reference:

1. Name: _____

Address: _____

_____ Postcode: _____

Tel Number: _____ Email Address _____

2. Name: _____

Address: _____

_____ Postcode: _____

Tel Number: _____ Email Address _____

Signed: _____ Print Name: _____

Date: _____



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VOLUNTEER REFERENCE FORM

_____ has expressed an interest in being a volunteer and has given your name as a referee.

This post involves substantial access to children. As an organisation committed to the welfare and protection of children, we are obviously anxious to know whether you would have any reason at all to be concerned about the applicant being in contact with children or young people. Would you consider the above named person poses any risk to the welfare of children or young people?

Yes/No (If answered Yes, we will contact you in confidence)

If you are happy to complete this reference, any information will be treated with due confidentiality and in accordance with relevant legislation and guidance and will only be shared with the person conducting the assessment of a candidate's suitability for a post, if he/she is offered the position in question.

We would appreciate your being extremely candid, open and honest in your evaluation of this person.

(1) How long have you known this person? _____

(2) In what capacity? _____

(3) What attributes does this person have that would make them a suitable volunteer? _____

(4) How would you describe their personality? _____

(5) Please rate this person on the following (please circle one for each statement):

- | | |
|-----------------------------------|---------------------|
| Responsibility | Poor/Good/Excellent |
| Maturity | Poor/Good/Excellent |
| Self Motivation | Poor/Good/Excellent |
| Can Motivate Others | Poor/Good/Excellent |
| Trustworthy | Poor/Good/Excellent |
| Reliability | Poor/Good/Excellent |
| Coaching / Administration Ability | Poor/Good/Excellent |
- (6) Is there anything else you feel we should know about this person?

Signed: _____ Print Name: _____

Date: _____

Position: _____ Organisation: _____

Adapted from "Our Duty of Care" published by Child Care N.I. (1992)