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.

Please send the completed form together with the required documents via email to **child.employment@towerhamlets.gov.uk**

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| Title:  |  |
| Forename(s): |  |
| Surname: |  |
| Previous names: |  |
| Date of Birth: |  |
| Full Address with post code: |  |
| Please state the number of years at this address: |  |
| If less than five years, please list previous addresses for the previous 5 years: (use a separate sheet if necessary) |  |
| Telephone No / Mobile: |  |
| Email: |  |
| Enhanced DBS Certificate Number: |  |
| Are you signed up to the DBS Update Service? |  |
| Name of Group(s) Associated with: (E.g., Theatre Group, Drama Group, Operatic Group, Dance School etc.)  |  |

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

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| Name of current/most recent employer: |  |
| Address: |  |
| Type of work/Position held: |  |
| Start date of employment: MM/YYYY |  |
| End date of employment: MM/YYYY |  |
| Reason for Leaving: |  |

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| --- | --- |
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| Type of work/Position held: |  |
| Start date of employment: MM/YYYY |  |
| End date of employment: MM/YYYY |  |
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| Address: |  |
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| End date of employment: MM/YYYY |  |
| Reason for Leaving: |  |

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| If there are any gaps in your employment history, please explain below: |
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| Any qualifications relating to work with children, or to performing arts: |

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| Qualification | Date | Awarding Body |
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| If qualified as a teacher give your TRN No. or provide a copy of your certificate if qualified as a youth worker: |
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| Do you hold a First Aid Certificate? | Yes | No |
| If 'Yes' please provide a copy of the certificate together with the training date and awarding body: |[ ] [ ]

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| Have you undertaken Safeguarding/Child Protection training in the last three years? | Yes | No |
| If 'Yes' please provide a copy of the certificate together with the training date and awarding body: |[ ] [ ]

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| Reasons for applying to become a matron/chaperone: | Type of Licence required: |  |
|  | Professional |[ ]
|  | Volunteer |[ ]

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| Experience of paid or voluntary work with children (use a separate sheet if necessary):  |
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| Experience of theatre, film, TV, or modelling work for yourself, or supervising a child (use a separate sheet if necessary): |
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| Drawing on your skills and experience provide a supporting statement on why you would be an effective Chaperone for Children employed in Entertainment: |
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| Have you previously been approved as a chaperone? | Yes | No |
| If 'Yes' please provide the dates and the name of the Authority: |[ ] [ ]

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| Have you previously been refused an application as a chaperone? | Yes | No |
| If 'Yes' please provide the dates and the name of the Authority: |[ ] [ ]

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| Have you been approved as a registered child minder or foster-parent? | Yes | No |
| If 'Yes' please provide the date, name and address of the Social Services Department which registered you: |[ ] [ ]

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| Are you registered as a disabled person?   | Yes | No |
| If 'Yes' please state your registration number: |[ ] [ ]

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| Do you have any health problems or disability that could affect you in working as a chaperone?  | Yes | No |
| If 'Yes' please enclose a letter from your GP or specialist stating that you can look after children working in entertainment. |[ ] [ ]

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| Do you have a full current Driving Licence? | Yes | No |
|  |[ ] [ ]

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| Do you have any penalty points? | Yes | No |
| If 'Yes' please provide the details: |[ ] [ ]

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| Does your car insurance cover you to carry passengers in connection with your business? If you are not sure, check with your insurers.  | Yes | No |
| 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. |[ ] [ ]

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| I hereby give permission for Tower Hamlets to carry our checks with other Local Authorities and other Tower Hamlets departments  | Yes | No |
| including Social Care Services as part of the approval of a chaperone licence. |[ ] [ ]

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| 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. |

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| Employment Referee |  |
| Title: |  |
| Name: |  |
| Address: |  |
| Email: |  |
| Telephone No: |  |
| Occupation: |  |
| Professional/Personal Referee |  |
| Title: |  |
| Name: |  |
| Address: |  |
| Email: |  |
| Telephone No: |  |
| Occupation: |  |

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| If approved, do you agree to your details being put on a list of Local Authority approved Chaperones that may be given to amateur | Yes | No |
| groups and dance schools? |[ ] [ ]

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| On occasion Tower Hamlets is, asked if we can supply companies with the names of our registered chaperones. I hereby give | Yes | No |
| permission for my name, email, and telephone number to be given to productions seeking Local Authority approved chaperones. |[ ] [ ]

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| We also require permission to disclose your name to other local authorities, schools, production companies and parents when we | Yes | No |
| send a copy of the child’s performance licence.  |[ ] [ ]

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| **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. |

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| Signed |  | Date |  |

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| 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)*