**CONFIDENTIAL**

 ![C:\Users\HP_Laptop\AppData\Local\Microsoft\Windows\Temporary Internet Files\Low\Content.IE5\KIR4UNG3\L Arche Logo[1].jpg]() **INTERNATIONA**L **VOLUNTEER**

 **APPLICATION FORM**

L’Arche Belfast

54 Knockbreda Road Email: volunteers@larchebelfast.org.uk

Belfast, BT6 0JB Telephone: 028 90 641088

 Northern Ireland

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| A PERSONAL DETAILS |

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| --- | --- |
| Last Name |  |
| First Name |  |
| **Current Address:**Street  |  |
| City |  |
| Country |  |
| Postcode |  |
| Home Telephone No |  |
| Mobile Telephone No |  |
| Email Address |  |
| Date of Birth |  |

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| --- | --- |
| Sex |  |
| Nationality |  |
| Country/Town of Birth |  |
| Country/Town of Current Residence |  |

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| When would you hope to come to L’Arche Belfast? |
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| How long do you hope to stay? *(We give priority to those who can commit for one year )* |
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| --- | --- |
| Passport Number |  |
| Passport Issuing Authority |  |
| Passport Issue DateDay/Month/Year | -------/---------/--------Day/Month/Year |
| Passport Expiry DateDay/Month/Year | -------/---------/--------Day/Month/Year |
| Do you have a Visa for entering the UK?\*\* | YES NO |
| If YES, state Visa number |  |
| Dates Visa is Valid from | From: -------/---------/-------- To: -------/---------/-----Day/Month/Year Day/Month/Year |

\*\*Applicants from outside the UK may be required to gain special registration or visa. We will help you apply for this should your application be successful.

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| B OTHER DETAILS |

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| How did you hear about L’Arche? ***Please be as specific as possible*** |
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| Have you ever applied to any other L’Arche Community? **If YES, which and when?** |
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| Is English your first language? |
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| If not: i) How good is your English: a. Spoken?  b. Written? ii) What language training have you had? |
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| Next of Kin/Emergency Contact  |
| Full Name |  |
| Street Address |  |
| City |  |
| Country |  |
| Post Code |  |
| Home Telephone No |  |
| Mobile Telephone No |  |

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| C EMPLOYMENT |

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| Present Employer: If you are employed please give details |
| Name of Employer |  |
| Street Address |  |
| City |  |
| Country |  |
| Post Code |  |
| Post Title |  |
| Brief Description of Duties |  |

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| Please list any previous employment or volunteer experience |
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| D EDUCATION |

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| Please list all qualifications obtained from schools, colleges and universities. Please list the highest qualification first: |
| College or University | Course | Qualifications and grades obtained |
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| School | Subjects | Qualifications and grades obtained |
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| E OTHER QUALIFICATIONS |

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| First Aid-Do you have current First Aid Certification? |  |
| CPR-(Cardio Pulmonary Resuscitation)Do you have current CPR Certification? |  |
| Driving Licence-Do you hold a full, clean driving license valid in the UK? |  |
| Number of years of insured driving? |  |
| Are you willing to drive during your time in L’Arche Belfast?  |  |
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| F SELF ASSESSMENT |

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| Why do you wish to live and work in L’ARCHE BELFAST? ***Include details of your hopes and expectations, why you want to come at this time, and what you think you would learn and enjoy.*** |
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| What experience do you have, if any, of living or working with people with learning disabilities? |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_What would be your initial response in a situation, if a person with a learning disability exhibited aggressive behaviour such as kicking, biting, and spitting?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Please read the Charter of L’Arche which is attached. Everyone who comes is expected to live and work closely with people of different faiths and beliefs, take part in the faith life of the Community, and accompany people with learning disabilities to their own churches. Are you willing to participate in this aspect of Community life? Please explain. |
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| Do you have any experience living in a community (doesn’t have to be a L’Arche setting)? If so, please give examples of something you liked and something you found difficult about living in community.  |
| Do you have any dietary restrictions and or allergies? i.e. vegetarian or dogs  |
| So that we can make the most of you, and you can make the most of us, please **circle**/**highlight** any of the following areas you would have a particular interest in. Please check out our website if you’d like to learn more about our day projects: **larchebelfast.org***Connecting one on one with people**Root Soup - cooking / catering**Green Buds - Allotment / Gardening* *Art, Crafts**Village Activities-Arts, Crafts, Music, Woodworking, Kitchen**Home Maintenance, House Cleaning, Driving**Typing, Writing, Preparing Monthly Newsletters, admin tasks**Prayer, leading Reflection Time**Fundraising, Marketing, Graphic design, website maintenance, Photography/film**Other (please list)* |
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| Tell us about your family...  |
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| What makes you happy? |
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| G HEALTH |

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| Successful applications will be required to provide a statement from his/her G.P. as to the state of his/her physical and mental health. |

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| H REFERENCES |

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| Please give the names and addresses of two people who are willing to be your referees. *If possible* one should be a recent employer and the other should be someone who has a professional or community position and has known you personally for *at least 3 years*. ***They should not be members of your family****.* |

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| **Referee 1** |
| Name |  |
| Position (Job Title) |  |
| Relationship |  |
| Number of Years Known |  |
| Street Address |  |
| City |  |
| Country |  |
| Postcode |  |
| Telephone No |  |
| Email |  |

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| **Referee 2**  |
| Name |  |
| Position (Job Title) |  |
| Relationship |  |
| Number of Years Known |  |
| Street Address |  |
| City |  |
| Country |  |
| Postcode |  |
| Telephone No |  |
| Email |  |

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| I PROTECTING CHILDREN AND VULNERABLE ADULTS |

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| Because L’Arche Belfast supports people who have learning disabilities who are considered vulnerable adults, an Access NI criminal history check will be carried out on all prospective employees and volunteers depending on their role. Do you have any objections? \*\*\* | YES NO |
| Are you aware of any police enquires undertaken following allegations made against you, which may have a bearing on your suitability for this post?\*\*\* | YES NO |
| \*\*\* Please complete Appendix 1 |

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| J DISABILITY DISCRIMINATION ACT |

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| This Act protects people with disabilities from unlawful discrimination. We actively encourage applications from people with disabilities. The Disability Discrimination Act defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long term effect on his or her ability to carry out normal day to day activities. |
| Do you have a disability that is relevant to your application? | YES NO |
| If YES, please give details. |  |
| We will try to provide access, equipment or other practical support to ensure that people with disabilities can compete on equal terms with non-disabled people. |
| Do we need to make any specific arrangements in order for you to attend the interview? | YES NO |
| If YES, please give details. |  |

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| K DECLARATION |

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| I hereby certify that:* all the information given by me on this form is correct to the best of my knowledge
* all questions relating to me have been accurately and fully answered
* I possess all the qualifications which I claim to hold
* I have read and, if I am accepted, I am prepared to fulfil the expectations and the responsibilities outlined in the role description.

(N.B. I understand and accept that any falsification of information in respect of this application may lead to being asked to leave the community at a later date) |
| Signed |  |
| Date |  |

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|  L’Arche Belfast undertakes that it will treat any personal information (that is data from which you can be identified, such as your name, address, e-mail address etc) that you provide to us, or that we obtain from you, in accordance with the requirements of the Data Protection Act 2018.If you are returning this form by email, you will be asked to sign your application at interview or on arrival. |

**PERMISSION FOR USE OF PHOTOGRAPH AND VIDEO IMAGES**

L’Arche Belfast uses photographs or video footage in publications, websites, and social networking sites (e.g. Facebook) for recruitment or promotional purposes. These photos and videos are used in a variety of contexts: locally within Belfast and Northern Ireland, within the Republic of Ireland and the UK, or within the context of Europe or the wider international community. As a core member, employee, or volunteer of L’Arche Belfast, you might feature in photographs or videos that would suit these publications and websites. Please tick the appropriate lines below to inform us in which situations you would allow L’Arche to use photographs and videos in which you appear, and sign and date the form.

L’Arche Belfast limits access to its social networking sites – photos and videos which appear on Facebook, etc. will not be available to the general public.

*Please note: if you choose NOT to give permission for L’Arche Belfast to use photographic or video images of you, it is your responsibility to ensure that others involved with L’Arche Belfast are aware that you do not wish to be photographed or filmed, and that you do not want your image used in any way. This form does not refer to the use of photographs by individuals for unofficial purposes or for purposes unrelated to L’Arche Belfast.*

**I give my consent for L’Arche Belfast to photographs and video footage in which I/my family member/client appear in the following ways (Please circle Yes or No where appropriate):**

* I give permission for my photograph to be used for internal publications, including but not limited to newsletters and photo albums.

 Yes / No

* I give permission for my photograph to be used for public documents recruitment and promotional materials. This includes but is not limited to our website, Facebook pages, and promotional videos.

 Yes / No

* I give permission for my photograph to be used in the above ways and for my name to appear alongside my photograph.

 Yes / No

* I give permission for my photograph to be used by organisations who are partners of L’Arche Belfast and involved in L’Arche projects and services.

 Yes / No

Name of service user in block capitals: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPENDIX 1**

**PROTECTING CHILDREN AND VULNERABLE ADULTS**

**Information about and consent to the AccessNI service check by applicants for posts involving work with vulnerable adults:**

Before appointing anyone to a care position in L’Arche Belfast, it is our policy to ask for an Enhanced Disclosure (Protection of Vulnerable Adults) check to be carried out by AccessNI. This check is to make sure that people who might be a risk to vulnerable adults are not appointed.

AccessNI provides criminal history information about anyone seeking paid or unpaid work in defined areas, such as working with children or vulnerable adults. AccessNI operates under the provision of Part V of the Police Act 1997. They will tell us if you have a criminal record, or if your name is included in the Disqualification from Working with Vulnerable Adults List. Any information which we get will be treated confidentially, and we will talk to you about it before we make a final decision. After the decision is made the information will be destroyed. If interested in more information about AccessNI, please consult their website, www.accessni.go.uk.

We will only ask for the check if we are thinking of appointing you, but you **must** tell us now if you have ever been convicted of a criminal offence, or cautioned by the police, or bound over. You **must** tell us about **all** offences, even minor ones such as motoring offences, and `spent' convictions, that is, things which happened a long time ago. If you leave anything out it may affect your application.

Please complete the section below and return it with your application. The form also asks you to give your written consent to the check. If you do not consent we will not accept your application.

**CONSENT TO ACCESSNI CHECK**

Do you have any prosecutions pending: **YES** [ ]  **NO**  [ ]

**If yes, please give details:**

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Have you ever been convicted at a court or cautioned by the police for any offence? **YES** [ ]  **NO** [ ]

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| **If yes, please list below details** of **all** convictions, cautions, or bind-over orders. Give as much information as you can, including, if possible, the offence, the approximate date of the court hearing and the court which dealt with the matter. |
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I understand that an AccessNI check must be carried out before my appointment can be confirmed.

This has been explained to me and I am aware that spent convictions may be disclosed. I declare that the information I have given is accurate and I consent to the check being made.

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| SIGNATURE: |       |

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| --- | --- | --- | --- |
| NAME(BLOCK CAPITALS): |       | **DATE:** |       |

Position Applied for: **Volunteer Assistant**