** Application Form (Intern)**

You must complete all sections of this Application Form (in blank ink or electronically). We will use this form to help us decide on your suitability for the post so please make sure it is accurate and complete.

By completing this form you consent to us using your details to contact you and relevant third parites regarding your application.

**Guidance on our Intern Pathways**

If we are able to support you in gaining a qualification then we would like you to commit to a certain number of volunteering hours in return. In most cases you will need to be in a volunteering role in order to gain your qualification (so that you can access and gain the necessary practical experience to prepare for your assessments

We do not enforce rigorous or mandatory conditions. And of course we hope that you will want to continue to volunteer on a long-term basis. As a guide we suggest the following as a minimum commitment – but remember that we are flexible and responsive to changing circumstances:

**Level 1 Qualifications**

Our suggested minimum is the duration of your qualification followed by volunteering at 8 sessions

**Level 2 Qualifications**

Our suggested minimum is the duration of your qualification followed by volunteering at 14 sessions

**Level 3 Qualifications**

Our suggested minimum is the duration of your qualification followed by volunteering at 20 sessions

**Resources**

We will provide the basic resources and support needed for you to pass your qualification. You will not have to pay for tuition or certification. There might be optional extra resources which you are free to purchase separately if you wish. We aim to provide the majority of our resources in electronic format p please let us know if this is not convenient for you.

**Behaviour expectations**

We require all our interns to follow the CIMSPA Code of Conduct. Not all roles require you to be a member of CIMSPA. If membership is required we will make this clear to you during the recruitment process. We expect you to be appropriately dressed when volunteering, and good personal hygiene is important when attending sessions. You must not attend any sessions if you are unwell or recovering from a recent illness.

More guidance on volunteering will be provided after recruitment is confirmed.

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| --- | --- |
| Voluntary Role applied for (to support your internship): | Closing date (if applicable) |
| Which qualification/s are you interesting in working towards? |
| Are there any other roles that would be of interest to you?  |

**Personal Details and Contact Details**

|  |
| --- |
| Title: Surname: Forenames (in full):  |
|  |
| Home Address: | Daytime Telephone No: |  |
| Evening Telephone No: |  |
| Mobile No: |  |
|  |  |
| Post Code: |  | e-mail: |  |

**When can you volunteer?**

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| Please tell us the day and, times you would be available (please also indicate the venues/locations that are suitable for you). |

**What has motivated you to apply for a volunteering role with Vista Wellbeing?**

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**What previous work experience (including voluntary work) do you have?**

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**What skills, knowledge and experience do you feel you could bring to a voluntary role within the Vista Wellbeing organisation?**

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**Are there any reasonable adjustments we could make as part of your recruitment process that**

**would enable you to enjoy equality of opportunity in seeking a volunteer role with us?**

**Please specify:**

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**References**

Please provide names and addresses of two people who we could contact for a reference.

(Someone who is not a relative, but has known you for 2 years within the last 5 years.)

|  |  |
| --- | --- |
| **Referee 1**  | **Referee 2** |
| Name: | Name: |
| Relationship to applicant: | Relationship to applicant: |
| Address: | Address: |
| Post Code: |  | Post Code: |  |
| Telephone No: |  | Telephone No: |  |
| E-mail: |  | E-mail: |  |

**Additional Information**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Are you licensed to drive any of the following? (please tick) | Private Car |  | Motor Bike |  | PCV |  | Other (give details) |  |
| Please tick if you have access to (use of) a vehicle |  | Do you have business insurance |  |  |  |
| Have you been the subject of a formal disciplinary sanction or are you in the process of ongoing disciplinary proceedings? | Yes \* |  | No |  |
| Have you been dismissed from any previous employment or volunteering role? | Yes \* |  | No |  |
| \* If yes, please indicate which employment and specify the reasons for your dismissal (use a separate sheet if necessary):***We may discuss this with you and your current or previous employers.*** |
| **Please note the following:**If you are related to anyone in this organisation please provide details |

1. **Criminal Record Checks Declaration:**

The role you have applied for might involve contact with adults at risk. Depending on the nature of the role, we may require you to undertake a criminal records check – and will contact you separately about this if required. All information you provide will be treated as confidential and managed in accordance with relevant data protection legislation and guidance. You have a legal right to access any information held about you.

In line with our safeguarding protocols we do ask that you disclose any pertinent information as follows.

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| --- | --- | --- | --- | --- | --- |
| Have you ever been known to the police or any other statutory agency as being a risk or potential risk to vulnerable groups?

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| YES\* |  | NO |  | (tick whichever is appropriate) |

\****If yes, please give details in the space provided below. The information you provide will be treated in confidence.*** |
| **Are you currently the subject of any police investigations following allegations made against you?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| YES\* |  | NO |  | (tick whichever is appropriate) |

\****If yes, please give details in the space provided. The information you provide will be treated in confidence.*** |
| Have you been the subject of any investigation and/or sanction by any organisation or body due to concerns about your behaviour towards vulnerable groups or individuals?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| YES\* |  | NO |  | (tick whichever is appropriate) |

\****If yes, please give details in the space provided below. The information you provide will be treated in confidence.*** |

**B) Safeguarding Declaration**:

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| I declare that the information I have given on this form is complete and accurate and that: * I am not barred or disqualified from working with vulnerable groups
* I am not subject to any sanctions or conditions imposed by the Disclosure and Barring Service or other regulatory body. .

Signed: Print Name:Date: |

**C) General Declaration**

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| I declare that the information provided on this form is true and complete to the best of myknowledge and belief. I understand that to knowingly give false information or to leave out any relevant information could result in:* the withdrawal of any offer of appointment, or
* my dismissal at any time in the future, and possible criminal prosecution (e.g. not disclosing barred status when working or volunteering in regulated activity)

I understand that if this application is successful then I will be expected to abide by the Vista Code of Ethical Conduct. I understand that failure to adhere to this Code may result in disciplinary action or dismissal. Signed: Print Name:Date: |

**D) GDPR Declaration**

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| Vista Wellbeing has a commitment to being fair, clear and transparent in the way we collect and process personal data. Below are key points relating to the collection of information on this application form.* **Legitimate interest**: we have a specific, explicit and legitimate purpose to collect your data.
* **Consent (for sensitive data):** we have legitimate interest to request and process sensitive data (for example we have a legal duty to check the criminal records of those working in regulated activity).
* **The “right to be forgotten”**: You may request that we delete all your personal data. Should you request this we will have to terminate any employment or volunteering opportunities in place at that time. Under some circumstances we may check with the statutory agencies with regard to deletion of data
* **The right to access and rectify data:** We will act on your requests to update any incorrect information and do this within one month. You may request access data we hold on you and we will repond to this within one month. A fee of £10 will apply to a full access request.
* **Accountability:** we will publish policies and other documents to support and explain our processing of data and operate in a transparent way.

Vista Wellbeing will only use the information given on this application form to determine your suitability for this post and for monitoring equal opportunities. We will keep application forms of unsuccessful candidates for a maximum of six months before securely disposing of them.Please sign below to confirm that you accept and agree to the statements above.Signed: Print Name:Date: |

Thank you for your interest, we will be in touch soon.

Please return completed form to:

info@vistawellbeing.org.uk

**Please note:**

All information received will be dealt with in confidence, consistent with our safeguarding commitments

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| VERSION CONTROL LOG |
| Nov 23 V2 | Addition of clause relating to pathways and suggested volunteering hours |
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