

APPLICATION FORM FOR SCOTTISH VOLLEYBALL STAFF / VOLUNTEERS in Regulated Work with Children

Title	First Name (s)	Surname
-------	----------------	---------

Previous names by which you might have been known:

Address :

Daytime Telephone Number :	Mobile Number:
----------------------------	----------------

Any Previous Addresses you have lived at in the last 3 years:

Email Address:	Gender (<i>tick</i>) <input type="checkbox"/> Male <input type="checkbox"/> Female
----------------	--

Current Occupation:

Have you any previous experience of working with children (voluntary or paid)? If yes, please detail below:

<u>Dates</u>	<u>Position</u>	<u>Organisation</u>	<u>Brief Description of Duties and Responsibilities</u>

Please provide details of two references with experience of your work or contact with children

Reference 1.	Reference 2.
Name	Name
Address	Address

If you have no previous experience of working with children, Please detail below any situations where regular contact has been outside your home with children.

Please provide details of two References

Reference 1.	Reference 2.
Name	Name
Address	Address