

TUTOR BEFRIENDER REGISTRATION FORM



Success4All
The Capper Room
Carnegie Building
Atkinson Road
Newcastle Upon Tyne
NE4 8XS

Section 1: Applicant Information

Full Name:

First Middle Last

Address:

Door Number Building Name Street

City County Post Code

Contact:

Personal Email Main Contact Number

Write above the line.

Section 2: Details

2.1: Gender

Female Male Other

2.3: Date of Birth

Day Month Year

Age:

Write details above

2.4: Health

Do you have any physical or learning impairments? Yes No

Are you suffering from a medical condition? Yes No

Do you have any special requirements? Yes No

If you answered 'Yes' to any of the questions above, please give details of the impairment/condition and state what special requirements you will need below.

Section 3: Protection of Children & Vulnerable Adults

This information is required before any person can volunteer with Success4All. It is to ensure our volunteers have met the requirements of the relevant legislation related to working with children. Further checks will be made to validate any information provided here.

3.1: Current Disclosure Barring Certificate (DBS)

Do you hold a current DBS certificate? Yes No (go to 3.2)

If yes, please provided details

	<i>Write Certificate Number Above</i>	<i>Write Date Issued Above</i>
Are you registered on the update service?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

If yes, do you give permission for us to check your DBS status on the update service? Yes No

3.2: DBS Application Details

Do you have a current DBS application in progress? Yes No (go to 3.3)

If yes, please provide details

Please write the "Tracking Number" and date obtained above

3.3: Consent for Success4All to help you obtain a DBS Certificate

If required, do you consent to a DBS check? Yes No

Section 4: Employment, Experience, Qualifications & Professional Memberships

The details you provide may be verified to assist us in your application.

4.1: Current Employment/Study situation

Please select the best category that represents your current situation

- Full time employed Part time employed Unemployed seeking work
 Full time student Part time student Unemployed due to sickness/ disability

Current employer/Place of study

Job position/Place AND course of study

If studying, when is your course due to end?

Write details in the appropriate sections above

4.3: Education

4.3.1: Higher Education

(Diplomas, Degrees, NVQs and other qualifications obtained at College or University)

Qualification	Date Obtained	Place of Study	Grade Obtained

Write details in the appropriate columns above

4.3.2: Secondary Education

(GCSE, A-Levels and other qualifications obtained whilst in secondary school)

Qualification	Date Obtained	School	Grade Obtained

Write details in the appropriate columns above

4.3.3: Other Qualifications

(First Aid, Health & Safety, Professional Memberships & other qualifications to support application)

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Write details in above

4.4: Relevant Experience

Please tell us about any experience you feel is relevant to your application. *(Applicable for all roles).*

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4.5: Reason for your application

Please tell us why you would like to volunteer with Success4All? *(Applicable for all roles).*

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4.6: Skills & Talents

Tell us of any specific skills/talents that you have, and, would be willing to run a possible Club at a Success4All Learning Hub? *(Applicable if applying for the role as a Tutor Befriender or Club Leader).*

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Section 5: Subjects You Would be Happy to Offer Tuition In

Completing the tables below, please tell us what subjects you would be happy to offer tuition in. This is just an indication for the moment but will help us to find the best position for you and your skills.

State all subjects up to 11 years old (KS2)	State all subjects up to 14 years old (KS3)
State all subjects up to 16 years old (KS4, GCSE)	State all subjects up to 19 years old (KS5, A-Level)

Section 6: Contact and Photo Consent

We like to keep volunteers updated via our newsletter during their time with us and after. We are also extremely grateful for any feedback that you are able to give us so that we can continue to improve our services.

Would you like to sign up to our newsletter?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Are you willing to complete a feedback form at the end of volunteering with us?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Do you consent to the information being used in an evaluation report?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Do you consent to your contact information being kept on file for 3-years after you have stopped volunteering to receive our newsletters or be asked for feedback?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Do you agree for photos of you to appear in advertising to promote Success4All (advertising could be, but not limited to: online, media reports/adverts, leaflets and posters).	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Our data protection states, that all data we collect is limited to what is necessary and what is lawful. We collect data to maintain your child’s safety and this data is stored securely electronically for 3 years. You have the right to have access to this data as well as the right to be forgotten. For more information, please visit our website.

Section 7: How Did You Hear About Success4All

Please tell us below how you heard about Success4All?

Write detail above

Section 8: References

To ensure we are following our commitment to the safety of our services users, and to make sure we are working with the right people to help our service users get the most out of our services, we reserve the right to contact referees at any time during your involvement with Success4All. References will be contacted upon successful applications. This can either be a current/past employer, a school teacher/university lecturer or a character reference from someone you have known for 2 years or more (excluding family members).

Referee 1		Referee 2	
Name:		Name:	
Email:		Email:	
Telephone:		Telephone:	
Relationship:		Relationship:	

Section 9: Emergency Contact

We need to get the details of an emergency contact for you so we know who to contact if something happens to you whilst you are working with us.

Name:	
Relationship to you:	
Contact number:	

Write details above

Section 10: Progression/Other Supporting Information

We'd like to know what are your plans long-term whilst volunteering with us (University/ Jobs)?

Also, if you feel there is something else you would like to say to support your application, you can use this section to include this information.

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Write details above

Section 11: Declaration

Thank you for your time in completing this application and your interest in Success4All. We want to ensure we keep you updated however, we aren't perfect and may not respond to your application. If this is the case, please assume that we have not been able to accommodate your offer at this time but we may contact you in the future if you have consented to this in section 5 of the form.

To protect organisation and our service users we ask that you read the following carefully:

1. By signing below, you are declaring that the information you have provided on this application is correct and that you consent to Success4All using the information to assess your application.
2. You further agree that we may share information about you with law enforcement and government agencies if requested to do so under UK legislation and laws.
3. Success4All reserve the right to suspend or end any relationships or agreements we may have entered into if information is provided to us or our agents that brings into question the suitability of any person(s) working with our organisation.
4. In the event that you become involved with any situation that may damage the reputation of Success4All or that may endanger our service users you agree that you will inform us in writing immediately.

Your Name:

Signature:

Date:

For Office Use Only

Application reviewed by:				
Application accepted?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Agreed by Initials:				
Review date:				
Learning Hub assigned to:				
DBS and documents checked? date and initials of verifier:				
Date & Initials applicant contacted to negotiate start date:				
Agreed start date:				