





[**www.lambethsummercamps.org**](http://www.lambethsummercamps.org)[**www.parallelyouthenterprise.com**](http://www.parallelyouthenterprise.com) **www.wandsworthsummercamp.org**

Which Summer Camp would you prefer to apply for? **LAMBETH** **WANDSWORTH**

|  |  |
| --- | --- |
| *Surname* |  |
| *Forenames* |  |
| *Date of Birth* |  |
| *Place of Birth* |  |
| *Address* |  |
| *Postcode:* |  |
| *Home Tel:* |  |
| *Mobile Tel:* |  |
| *Email address* |  |

How would you describe yourself? *Please tick or an x?* Caribbean

African

Any other Black Background

White British

White Irish

Any other White Background

Black British

Chinese

Indian

Pakistani

Bangladeshi

Any other Asian Background

White & Black Caribbean

White & African

White & Asian

Any other Mixed Background

Any other Ethnic Group

Declined to Answer.

**Equal Opportunities Monitoring *The information in this section is used only* for *the purposes of ensuring the* *effectiveness of our Equal Opportunities policy, which is available on request.***

Your availability ***Please tick or place an ‘x’ as appropriate* BOTH PROJECTS START ON 25 JULY.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **WEEK 1** |  | **WEEK 2** |  | **WEEK 3** |  | **WEEK 4** |  |
| Mon 25 July |  | Mon 1 August |  | Mon 8 August |  | Mon 15 August |  |
| Tues 26 July |  | Tues 2 August |  | Tues 9 August |  | Tues 16 August |  |
| Wed 27 July |  | Wed 3 August |  | Wed 10 August |  | Wed 17 August |  |
| Thurs 28 July |  | Thurs 4 August |  | Thurs 11 August |  | Thurs 18 August |  |
| Fri 29 July |  | Fri 5 August |  | Fri 12 August |  | Fri 19 August |  |

Do you have a disability / impairment? **YES NO**

Drawing on your knowledge, experience, skills, and abilities please tell us a little about yourself and why you want to be a volunteer for the Lambeth or Wandsworth Summer Camps. E.g., an example of work that you have done or skills / interests that you can pass on to the Projects. *Please continue a separate sheet to add more*……………

Please tell us about any courses you have passed e.g. First Aid

As a Project Volunteer you will be working with young people and therefore will be subject of the required

Parallel Youth Enterprise (PYE) vetting procedure which **must** include a DBS check. ***Please tick as appropriate***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Have you had a recent ‘Disclosure & Barring Service’ (DBS) check?** | **YES** |  | **NO** |  |
| **If ‘YES’ do you agree for the Parallel Youth Enterprise to have sight of the original form** | **YES** |  | **NO** |  |

|  |  |
| --- | --- |
| If you have a DBS check what is the reference number and date of issue as shown on the form | No.  Date of issue: |

Please provide details of a referee e.g., a past employer or person who knows you well.

Name  *In what capacity do you know the referee?*

Address

Tel. Email

I understand that any offer of being a volunteer with Parallel Youth Enterprise Summer Camps is subject to satisfactory references, and binding in honour only.

*ONCE THIS APPLICATION IS PROCESSED AND AGREED ALL VOLUNTEER INFORMATION DETAILS WILL BE SENT TO YOU, WHICH WILL INCLUDE: letter of engagement, volunteer policy, safeguarding details.*

***We operate in accordance with the GDPR Regulations and the Data Protection requirements. FULL DETAILS OF OUR ‘PRIVACY NOTICE’ CAN BE FOUND ON OUR WEBSITE*** [***www.parallelyouthenterprise.com***](http://www.parallelyouthenterprise.com) ***OR BY CONTACTING lsptlspt1@gmail.com***

**Signature Date**

Please return the completed form to: Volunteer Co-ordinator

Parallel Youth Enterprise

C/o Safer Schools Office

Gipsy Hill Police Station

66 Central Hill

London SE19 1DT ***or email it to*** [***lsptlspt1@gmail.com***](mailto:lsptlspt1@gmail.com)

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