

# Loreto Sisters

## Confidential Application Form Staff and Volunteers

Surname: .....

Maiden Name  
(if applicable): .....

Christian Names: .....

Address: .....  
.....

Date of Birth: ..... Tel No: .....  
Mobile No: ..... Email: .....

Which Loreto ministry are you volunteering for ?  
.....  
.....

Have you previously been involved in voluntary work ?  
 Yes  No

If yes, please give details  
.....  
.....

Why do you want to get involved in this Loreto ministry ?  
.....  
.....

Have you previously received any training for working with children?  
 Yes  No

If yes, please give details  
.....  
.....

Any other relevant information ?  
.....

Is there any medical or other reason why you may be deemed unsuitable to work with children ?  
 Yes  No

If yes, please give details  
.....  
.....

**Please provide the names and addresses of two people whom we could contact for a reference (not relatives)**

Name: .....	Name: .....
Address: .....	Address: .....
.....	.....
.....	.....
Tel No: .....	Tel No: .....
Email: .....	Email: .....

I declare that the above information is true and that I am fit to serve as a volunteer with this Loreto ministry. I have received and read the Loreto child safeguarding policy and agree to abide by it. I understand that if I fail to do this my participation may be withdrawn.

Are you prepared to complete and submit a Garda Vetting / Access NI Vetting form at the start of your employment and/or as often as deemed necessary or appropriate thereafter ?

Yes  No

I give consent for this form, together with the Garda Vetting/Access NI Disclosure, be held on file in accordance with the Data Protection Acts (as amended) and retained for the purpose of child safeguarding. Data will be used for the purpose indicated on the form only. This form may be accessed by those with responsibility for managing records or group programmes.

Yes  No

Signed: .....

Date: .....