



CHY 11785

Volunteer Application Form for the CCYM Upstairs Downstairs Weekend Easter 2019

To be completed by *all* CCYM Volunteers

Friday 12th - Sunday 14th April 2019 in Drewstown House, Co. Meath

Cost € 30.00 per person (Don't let lack of funds stop you from applying)

Please return completed Application Form **as soon as possible** to:

CCYM c/o Tubrid, Mooncoin, Co. Kilkenny X91 C3K0

Latest date for receipt of application forms is 04/04/2019

Name: _____

Address: _____

Contact No: _____

Email: _____

Please tick your age

15 - 17

18 - 21

21+

Which areas do you want to work in at the weekend? (This is just a guide and not a guarantee!)

Directly with children Practical Helps

With Children: Tell us what age group you most enjoy working with: _____

Practical Helps: Tell us what areas you want to work in: _____

I agree to abide by the CCYM contract for volunteers. In particular:

1. I will focus my attention on the children and not on my own needs during the camp
2. I will treat children & teenagers with respect
3. I refuse to sit on the sidelines, observe and do nothing. Instead I will participate wholeheartedly in everything the children are expected to do. I will look out for what needs to be done and I will do it.
4. During the week, I will keep my relationship with other leaders absolutely professional. I agree to abide by the no-dating policy.
5. I will constantly be on the lookout for danger and if I can't deal with a situation I will get help.
6. I will communicate with the Leadership Team on a daily basis and pass on important information to the Duty Officer

Have you any Health needs?

Please Outline: _____

Are you on any medication? Yes No

Have you any dietary requirements or allergies? Please outline:

Answering YES to any of the questions (above and below) does not necessarily disqualify you from being a leader but it will help us to help you find your place in the CCYM Team this weekend.

	Please tick	Yes or No
1. Do you smoke or take drugs currently?	YES	NO
2. Have you ever been questioned by the Gardai / Police?	YES	NO
3. Are you attending counselling currently?	YES	NO
4. Have you ever been convicted of a crime against children or adults?	YES	NO
Have you applied for Garda Vetting to CCYM? (if aged 18+)?	YES	NO
Have you submitted photographic proof of identity to CCYM? If not please attach with this application form. <ul style="list-style-type: none">• For volunteers under 18 a photocopy of an ID with your photo is required.• For volunteers aged 18+ two proofs are required. Can include a photocopy of your passport / driving licence / Wok ID etc.	YES	NO

If you answered YES to questions 1,2, 3 or 4 please use page 3 to outline details.

If you need to be Garda vetted please contact us as soon as possible by email to info@ccymweb.com or on the CCYM phone +353 (0)86 2328835. It is now mandatory that all volunteers aged 18 and over are vetted.

Signed: _____

Date: _____

If you are under 18 a parent / guardian should sign here:

I give consent for my child to attend the CCYM weekend as a Junior Leader

Signed: _____ **Date:** _____

Additional Comments:

***CCYM are updating references for all Leaders / Volunteers so we would ask you to provide the name, address **and contact details** (phone number or email) of **two** referees. We cannot accept references from family members.

Referee 1:

Name: _____

Address: _____

*Contact details _____

Role: _____

*Can be telephone number or email address:

Referee 2:

Name: _____

Address: _____

*Contact details: _____

Role: _____

Thank you for completing this application form.