



# Application Form for ALL Leaders 2018

*Please return as soon as possible even if you are unsure of your availability to attend.*

**This Information is Strictly Confidential.** Please return completed form as soon as possible.

Please answer ALL questions on pages 1 - 3.

Questions marked with a \* are compulsory and your form will be returned if they are not completed.

▶ ● \*Name: \_\_\_\_\_ **\*Please tick your age group:**

● \*Address: \_\_\_\_\_ 15- 17  Date of Birth: \_\_\_\_\_

● \*Telephone No: \_\_\_\_\_ 18 - 21

● \*Email \_\_\_\_\_ over 21

▶ \*Which Camp are you applying for ? (Please tick )

**Junior Camp**

**6 - 11 year olds**

**Drewstown House**

**Sunday, 29th July - Friday, 3rd August**

**Senior Camp**

**11 - 14 year olds**

**Drewstown House**

**Sunday 5th - Saturday , 11th August**

Cost: € 100 for two Camps / € 60 for one Camp (don't let lack of finance put you off applying: contact the CCYM Team at 086 2328835)

▶ Which areas are you willing to work in at Summer Camp? (Please tick)

Directly with children	<input type="checkbox"/>	Nursing / First Aid	<input type="checkbox"/>
In dining room / kitchen	<input type="checkbox"/>	On prayer team	<input type="checkbox"/>
Crafts	<input type="checkbox"/>	Sports / options	<input type="checkbox"/>

Other: (please list): \_\_\_\_\_

Do you have First Aid Training and Qualification? (Please give details of qualification and dates of refresher training if appropriate). Are you a qualified Life Guard? Please give details below:

\_\_\_\_\_

\_\_\_\_\_

▶ **All CCYM volunteers aged 18 and over need to be Garda vetted (or Police checked) through CCYM *even if you have been Garda vetted for work in another agency.* See Page 4 for details.**

▶ *\*I declare that there is no reason why I would be unsuitable to work with young people in Chrysalis Summer Camps. I have no criminal conviction relating to offences against children or adults: (if you wish to talk to the CCYM Team in confidence contact details are on page 3).*

● **\*SIGNED:** \_\_\_\_\_ **^DATED:** \_\_\_\_\_

**If you are under 18 your parent or guardian needs to sign the declaration below.**

*I give my permission for the above to attend CCYM as a volunteer.*

● **SIGNED (Parent/Guardian):** \_\_\_\_\_ **DATED:** \_\_\_\_\_



▶ \*Answering YES to any of the following questions 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 year.

- Do you smoke?
- Have you ever been questioned by the Gardai/
- Have you ever been through counselling?
- Have you ever taken illegal drugs?

YES		NO	
YES		NO	
YES		NO	
YES		NO	

If you answered 'yes to any of the above questions please outline when this happened (i.e. in the last three months, in the last year, over a year ago) and the circumstances involved:

▶ \*Are you currently on medication?      Yes       No   
 \*Please outline:

▶ \*Please outline any additional information you would like to give including any health issues - if you do come to camp as a Leader we want to ensure your safety & comfort as well as the children!  
 \*Could your health issues impact on your work in CCYM summer camps?

▶ *CCYM are required to ask all volunteers for documentation to validate their identity. If you are over 18 years of age please provide **two** documents. These can include a photocopy of your passport / driver's licence / medical card / student ID / employment card etc. At least one of the documents provided must contain a photograph.  
 If you are under 18 years of age **one** document containing your photograph should be provided.  
 Thank you if you have already provided this!*

▶ \*If coming to Camp what do you want to get for yourself? What do you want for the children?

▶ In CCYM we ask our volunteers to be aware of the impact of their work with children during and after the summer camps. For this reason we ask leaders to be careful about what they put up on Facebook or any other Social Media outlet in order to protect the children who attend CCYM. Contact between leaders and campers can only be through the CCYM Facebook or Website.

\*I agree to this CCYM rule:    Yes     No

▶ \*Please outline any previous experience of working with children or teenagers:

▶ \*In your own words describe if you have asked for / received inside life from Jesus or if you are still searching for Him. Please give details.

▶ \*I confirm that all of the above information I have given on this form is accurate.

● **SIGNED:** \_\_\_\_\_

● **DATED:** \_\_\_\_\_



## REFERENCES & REFEREES

In order to fulfil the CCYM Child Protection Policy we ask **all** leaders to submit the names and contact details of 2 referees.

For Junior Leaders we ask that one of the references is from your school, college or training centre where possible, and we enclose a reference form for you to give to a Principal or teacher before the end of term with a stamped addressed envelope so they can return the reference directly to CCYM. Your second reference request form will be sent directly to the second named referee as listed below.

If you are struggling to get 2 references please contact us on Facebook (Private Message) or the CCYM mobile phone 086 232 8835. You can also contact us on [www.ccyweb.com](http://www.ccyweb.com)

CCYM accept references from a wide range of sources including churches, youth groups, sporting groups, employers, community leaders etc. References from relatives are not normally accepted.

- ▶ ***\*Please give the name of two people in leadership that you are asking for a reference. Please don't use anyone from the CCYM leadership team (unless you work with them outside CCYM)***
- \*Please give exact addresses and telephone numbers & email addresses.***

▶ <input type="radio"/> *Name: _____	▶ <input type="radio"/> *Name: _____
<input type="radio"/> *Address: _____ _____	<input type="radio"/> *Address: _____ _____
<input type="radio"/> Telephone No. _____	<input type="radio"/> Telephone No. _____
<input type="radio"/> *Position: _____	<input type="radio"/> *Position: _____
<input type="radio"/> *EMAIL: _____	<input type="radio"/> *EMAIL: _____

**If you have not been through Garda vetting or Police checks through CCYM please complete the information sheet overleaf and email to Margy Boyle at: [margyboyle.mb@gmail.com](mailto:margyboyle.mb@gmail.com).**

- \*I agree to abide by the Principles of Leadership as outlined in the Leader's Contract and the CCYM Child Protection Policy, if I am accepted as a leader at Camp.
- \*I also confirm that all of the above information I have given on the form is accurate.

**SIGNED:** \_\_\_\_\_  **DATED:** \_\_\_\_\_

Thank you for completing this Application Form. Please return it as soon as possible.



[www.facebook.com/ccymireland](http://www.facebook.com/ccymireland)

[www.ccyweb.com](http://www.ccyweb.com)

**CCYM Contact Number: 086 232 8835**

**\*\*To be completed by any CCYM Volunteer (age 18 and over) who has not yet applied for Garda / PSNI checks through CCYM**

**Initial Information required for Garda / PSNI vetting  
(This is now mandatory for everyone aged 18+)**

**Confidential:**

If you need further information you can email Margy at:

**[margyboyle.mb@gmail.com](mailto:margyboyle.mb@gmail.com)**

***Please complete the Invitation to Garda Vetting which is now mandatory for all volunteers and return to Margy Boyle, Secretary, CCYM. This will be sent to the Louth Volunteer Centre who process the Garda vetting requests for CCYM.***

***You will then receive an email from the Garda Vetting Unit asking you for further details. Please respond to this email or you will not be vetted and therefore unable to work in CCYM***

***Proof of Identity:***

***CCYM are required to ask all volunteers for documentation to validate their identity. Thank you if you have already sent this. If not...read on!***

***If you are over 18 years of age please provide **two** documents. These can include a photocopy of your passport / driver's licence / medical card / student ID / employment card etc. At least one of the documents provided must contain your photograph.***

***If you are under 18 years of age **one** document containing your photograph should be provided.***

***Thank you. We really look forward to receiving your information and to working with you!***