

Process for ALL new volunteers

Volunteer Registration Form

VOLUNTEER ROLE

Name of Parish and Churches:	
Role(s) you are volunteering for:	

PERSONAL INFORMATION

Title	
First Name	
Surname	
Address	
Postcode	
Preferred telephone number	

Email address	
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VOLUNTEERS FROM OUTSIDE OF THE UK

If you are from outside the UK, you will need to check that your visa allows you to volunteer. Individuals who are asylum seekers, with refugee status or who have exceptional leave to remain can volunteer.

The UK Borders and Immigration Agency should be contacted if there is any uncertainty about permission to volunteer in the UK.

Are you permitted to volunteer in England and Wales? Please tick

Yes	
No	

As a volunteer of The Diocese of Salford we will from time to time contact you in relation to your roles for training and monitoring purposes, by signing this form you are giving your consent for us to contact you for this purpose.

We would also like to contact you on occasions to inform you of events within the Diocese such as celebratory masses, deanery events, pilgrimages etc.

Do you consent for us to contact you for this purpose? Please tick

Yes	
No	

DECLARATION

I understand that providing misleading or false information may disqualify me from volunteering.

Signature:	Date:
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Reference Contact Details Form

If you are volunteering in a role that requires a Disclosure & Barring Service (DBS) check, you will also be required to give the names of two referees.

Please give the names and addresses of the two people who's reference you have provided to support your application. Ideally, these will be people that have known you for at least 2 years e.g. current or previous employer, somebody from another volunteering role, friend, neighbour, or tutor. Your Parish Priest, Deacon, members of your diocesan safeguarding team or family members cannot be used as referees. **It is the responsibility of the volunteer to obtain their references, it's the Safeguarding Office's responsibility to follow up on the reference (spot checks will be done).** The reference request form and questions A to D are for you to give to your chosen referee (please see pages below). You must seek permission from your referees, in advance of providing their contact details. Please confirm below for each referee, that you have obtained their consent.

Referee 1	
Name and capacity in which the person knows you	
Full address (including postcode)	
Telephone number	
Email address	
I confirm that consent has been obtained from the referee, to provide their name and contact details, for the purpose of providing a reference for this specific role.	

Referee 2	
Name and capacity in which the person knows you	
Full address (including postcode)	
Telephone number	
Email address	
I confirm that consent has been obtained from the referee, to provide their name and contact details, for the purpose of providing a reference for this specific role.	

Signed: _____

Print Name: _____

Date: _____

The Diocese of Salford
Cathedral Centre
3 Ford Street
SALFORD
M3 6DP
0161 817 2206

safeguarding@dioceseofsalford.org.uk

Reference request form

Dear (Insert Name of referee)

RE: Reference request for (Insert Name of Applicant/ Volunteer)

The above-named person has applied to be a volunteer within The Diocese of Salford and has nominated you to provide a reference for them.

I would be grateful if you would kindly complete the enclosed form and comment on their suitability to work with children, young people, and vulnerable adults.

This standard procedure is part of our national safe recruitment policy. The welfare of children, young people and vulnerable adults in our parishes is paramount and therefore all volunteers who are working with vulnerable groups are asked to undertake this process.

As there are many volunteer roles currently being undertaken by parishioners within the Catholic Church, the enclosed form is generic. If there is any aspect of the reference request form about which you feel unable to comment, then please state this in the appropriate section on the form.

Thank you very much in anticipation for your cooperation. Please do not hesitate to contact the Safeguarding Department on 0161 817 2206 should you have any concerns or areas about which you would like clarification.

Please complete the attached form as honestly and accurately as you can to the best of your knowledge.

Yours sincerely

Safeguarding Department

PRIVACY STATEMENT

The information that you provide on this form will be processed in accordance with the General Data Protection Regulation 2018, the Data Protection Act 2018 and our Privacy Notice which is attached. This form will be held securely, confidentially, will not be shared with third parties, and will be retained in accordance with our record retention schedule.

The role that this candidate has applied for may involve contact with and responsibilities towards children and / or adults at risk.

Please answer all questions honestly and accurately to the best of your knowledge.

A. To be completed by recruiters/ PSR's

Applicant name	
Applicant Job Title:	

B. To be completed by referees

Name	
Telephone number	
Email	
Address	
How long have you known the applicant and how well do you know the applicant?	

C. Information about the applicant – please comment on your experience of the applicant:

Ability to assume responsibility	
Ability to get on well with others and manage conflict	
Ability to learn quickly	
Enthusiasm and commitment	
Ability to work on their own and as part of a team	
Ability to follow instructions	
Is there anything else you would like to add about this applicant / do you have any other information you feel would be relevant to us in relation to suitability for this role?	

D. Statement of truth and signature

Statement of truth:	I certify that the information that I provide in this reference is true, to the best of my knowledge:
Signature:	
Date:	

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Is there anything else you would like to add about this applicant / do you have any other information you feel would be relevant to us in relation to suitability for this role?	

D. Statement of truth and signature

Statement of truth:	I certify that the information that I provide in this reference is true, to the best of my knowledge:
Signature:	
Date:	

Identity Verification Form DBS 3 Guidance Notes

Applicants from the United Kingdom (UK)

& Volunteers from Outside the UK

The applicant must provide documents from Route 1 first if they have them

- **Route 1:** At least 1 document from Group 1 and 2 further documents from either Group 1 or Group 2a/2b. At least one of these documents must confirm your current address. If you cannot provide these, please use Route 2. If you are not a national of the UK and you are applying for voluntary work, you may need to be fingerprinted if you cannot show these documents.
- **Route 2:** This route can only be used if it is impossible to process the application through Route 1. Documents required are 1 document from Group 2a, and 2 further documents from either Group 2a or 2b. At least one of these documents must confirm your current address. You will also be required to have your ID validated by an external service. If you are not a national of the UK and are applying for voluntary work you cannot use Route 2.
- **Route 3:** This route can only be used if it is impossible to process the application through Routes 1 or 2. Route 3 can be used for a paper application processed via E-Bulk. Yes needs to be selected on W59 on the purple form. Documents required are a birth certificate issued after the time of birth (UK, Isle of Man and Channel Islands), 1 document from Group 2a and 3 further documents from Group 2a or 2b. At least one of these documents must confirm your current address. You will need to be fingerprinted if you cannot provide these documents. Non UK nationals who have been resident in the UK for 5 years or less cannot use this Route.
- **Fingerprinting:** This can only be done using a DBS (Disclosure & Barring Service) Paper Application and not via an Electronic DBS Application. ***NO must be selected at question W59 on the purple form by the ID Verifier.*** The DBS will send a letter requesting applicants attend a fingerprinting appointment at their local police station.

ID verification can now be done via live video link. However, it is important to note that the person carrying out the identity check must be in physical possession of the original documents.

At least one of the documents must show the applicant's full name, date of birth and current address.

A document from each of the groups should be included only once in the document count.

If the applicant cannot provide these documents, they may need to be fingerprinted.

Group 1: Primary identity documents

- **Passport - Any current and valid passport**
- **Biometric residence permit - UK**
- **Current driving licence photocard - (full or provisional) - UK, Isle of Man, Channel Islands**
- **Birth certificate - issued within 12 months of birth - UK, Isle of Man and Channel Islands - including those issued by UK authorities overseas, for example embassies, High Commissions and HM Forces**
- **Adoption certificate - UK and Channel Islands**

Group 2a: Trusted government documents

- **Current driving licence photocard - (full or provisional) - All countries outside the UK (excluding Isle of Man and Channel Islands)**
- **Current driving licence (full or provisional) - paper version (if issued before 1998) -UK, Isle of Man, Channel Islands**
- **Birth certificate - issued after 12 months of date of birth - UK, Isle of Man and Channel Islands**
- **Marriage/civil partnership certificate - UK and Channel Islands**
- **Immigration document, visa, or work permit – Issued by a country outside the UK. Valid only for roles whereby the applicant living and working outside of the UK. Visa/permit must relate to the non-UK country in which the role is based¹**
- **HM Forces ID card - UK**
- **Firearms licence - UK, Channel Islands, and Isle of Man**

Group 2b: Financial and social history documents

- **Mortgage statement UK - Issued in last 12 months or bank or building society statement UK and Channel Islands - Issued in last 3 months or bank or building society account opening confirmation letter UK - Issued in last 3 months or bank or building society statement - countries outside the UK - Issued in last 3 months – branch must be in the country where the applicant lives and works²**
- **Credit card statement UK - Issued in last 3 months or financial statement, for example pension or endowment UK - Issued in last 12 months**
- **P45 or P60 statement UK and Channel Islands - Issued in last 12 months**
- **Letter of sponsorship from future employment provider non-UK only - valid only for applicants residing outside of the UK at time of application – Must still be valid**
- **Utility Bill UK - electricity, gas, water, telephone not mobile telephone bill - Issued in last 3 months or Council Tax statement UK and Channel Islands - Issued in last 12 months**
- **Benefit statement, for example Child Benefit, Pension UK - Issued in last 3 months**
- **Central or local government, government agency, or local council document giving entitlement, for example from the Department for Work and Pensions, the Employment Service, HMRC UK and Channel Islands - Issued in last 3 months**
- **EEA National ID card / Irish Passport Card – cannot be used with an Irish Passport / Cards carrying the PASS accreditation logo UK, Isle of Man and Channel Islands / Letter from head teacher or college principal UK - for 16 to 19-year olds in full time education - only used in exceptional circumstances if other documents cannot be provided – All must still be valid**

¹ This relates to where the appointment decision is being made in the UK

² This relates to where the appointment decision is being made in the UK

Identity Verifier DBS 3C Form

For use with the electronic DBS application process

To be completed by the ID verifier in **BLOCK CAPITALS**:

Full name of Applicant (including title and middle names):

Please state any additional/previous names (including title, middle, last names) and the date the applicant was known by these names (IF MORE THAN 4 CHANGES PLEASE INCLUDE ADDITIONAL PAGE)

Full name (including title, middle and surname)	Start date in DD/MM/YYYY ONLY	End date in DD/MM/YYYY ONLY

Parish / Church / Religious Order / Organisation:

All roles applicant will undertake: Please tick if role is:
 Volunteer Paid

Email address:

Telephone number: National Insurance Number:

Applicant's Date of Birth:

Applicant's current address:

Applicant has lived here since (DD/MM/YYYY):

All previous addresses within last 5 years if Applicant has lived at their current address for less than 5 years (IF MORE THAN 4 ADDRESSES PLEASE INCLUDE ADDITIONAL PAGE):

Address:

Date moved in (DD/MM/YY): Dated moved out (DD/MM/YY):

Address:

Date moved in (DD/MM/YY): Dated moved out (DD/MM/YY):

Address:

Date moved in (DD/MM/YY): Dated moved out (DD/MM/YY):

Address:

Date moved in (DD/MM/YY): Dated moved out (DD/MM/YY):

Documents provided for verification: (Please state the documents you are verifying)

Document 1:

Document 2:

Document 3:

Document 4:

Document 5:

I confirm that the applicant has provided sufficient evidence / explanation to prove ALL their name changes

	(Please tick to confirm)
At least one document provided contains a date of birth	
At least one document provided contains a current address	
At least one document provided confirms the applicant's current full	
Name change evidence has not been provided. A probing discussion between ID verifier and PSR has taken place and is noted below* (*Failure to record notes of the reason for insufficient evidence in the 'Discussion Note's below will result in the application being rejected. By ticking this box you are verifying that the information on additional/previous names and dates known by on page 1 is fully complete and verified)	
Discussion Notes:	

ID Verifier's Full Name:

Name of Parish (include town)/Religious Order or Organisation:

Position:

Signed: **Date:**

To be completed by the applicant:

I consent to my data being processed online by a secure third-party data processor for the purpose of my DBS application.

I understand if I do not consent to an electronic result being issued to the registered body submitting my application that I must not proceed with my application.

I understand that to withdraw my consent whilst my application is in progress I must contact the DBS helpline 03000 200 190. My application will then be withdrawn.

Name:

Signed: **Date:**

WRITTEN AGREEMENT FOR VOLUNTEERS

Name of Volunteer _____

We welcome you at _____

Name of Group _____

Meeting Details _____

Age Ranges _____

We put a very high value on all our work with children, young people, and vulnerable adults. We want to make sure you know the resources and support available to you. We intend you should not work unsupported or unsupervised.

The person designated to give you support is:

The particular responsibilities of your role have been discussed with you in detail. Any further questions that arise from time to time can be discussed with:

We want to help you give the best possible service to your group, so we will meet with you to talk about your work with children, young people, or vulnerable adults. Training needs will also be discussed with you and opportunities to develop your skills made available to you.

Signed _____ Dated _____

Parish Priest/Designated Person

TO BE COMPLETED BY THE APPLICANT

I have read the Church's policies for safeguarding children, young people and vulnerable adults. I understand that it is my duty to safeguard the children and young people and vulnerable adults with whom I have contact. I know what action to take in cases of suspected or alleged abuse and agree to adhere to the Code of Conduct.

Signed _____ Dated _____

Code of Conduct for Leaders and Helpers

We are called upon to be exemplary models of moral behaviour and spiritual faith.

Group Leaders and helpers (including responsible adults aged 18+ years and responsible persons aged 16 and 17 years) are committed to being positive role models and building the confidence of children and young people that they are working with.

Leaders and helpers are expected to:

Promote Wellbeing

- Ensure the safety of all children and young people by ensuring group sessions are safely planned and effectively supervised.
- Foster teamwork and co-operation between everybody, promoting trust and mutual respect.
- Discourage and stop rough or dangerous play, bullying, inappropriate language or other inappropriate behaviour.
- Treat all children and young people fairly and not show favouritism.
- Be positive, approachable and offer praise to promote the objectives of the group always.
- Listen sensitively and encourage communication between adults and children or young people.
- Respond to concerns and allegations promptly and appropriately in line with national procedures.

Promote Autonomy & Dignity

- Ensure the rights and responsibilities of children and young people are enforced.
- Promote the full participation and involvement of all children and young people, recognizing and addressing the additional needs of some children and young people e.g. disability.
- Constructively challenge all discrimination and encourage children and young people to not discriminate on the grounds of age, gender, ability, social class, race, cultural background, religious beliefs, or sexual identity.
- Respect, promote and support the right of children and young people to make their own choices and decisions, provided this does not threaten the rights, safety, and legitimate interests of others.
- Respect the right of children and young people to personal privacy.
- Encourage children and young people to take responsibility for their own self-care as far as possible e.g. assistance with toileting and dressing.
- Respect and listen to the opinions of children and young people
- Encourage children and young people to point out behaviours or attitudes that they do not like.
- Encourage children and young people to take responsibility for their own conduct.
- Ensure that sanctions do not humiliate or harm a child or young person.
- Administer first aid in the presence of others and without removing the clothing of a child or young person unless necessary.

Boundaries and Power

- Establish appropriate boundaries between pastoral care and personal lives in relationships with other leaders, helpers, children, and young people.
- Not abuse the position of trust for personal benefit e.g. financial gain, sexual gratification;
- Be conscious of explicit and implicit power vested in the role of group leader, supervisor of adult helper.
- Acknowledge the limitations of time, experience, skill, and competence – know where and how to ask for support when needed.
- Deal with differences in opinion with respect.
- Work to people’s strengths, and never bully, abuse, manipulate or denigrate.

Personal Conduct

- Act always in accordance with the core values of the Catholic faith and ensure that their behaviour does not bring the church into disrepute.
- Provide an example you wish others to follow.
- Work in a way that is honest, reliable, and transparent, never seeking to deceive or manipulate.
- Refrain from using blasphemous, violent, discriminatory, or offensive language and behaviour.
- Refrain from smoking, vaping, consuming alcohol or using drugs.
- Seek help to address issues such as addictions to alcohol, prescribed medicine, other substances, gambling, and so on where these matters affect the adult’s role.
- Not engage in any form of sexual relations (including verbal banter, flirtation, using one’s gaze to signal attraction, etc.) with children, young people, young helpers, or adults for whom you have a supervisory or supportive role.

Any breaches of the Code of Conduct will be addressed by the group leader. More serious or persistent breaches may result in formal action being taken to address the concerns. All concerns or allegations in relation to the abuse of a child or adult at risk will be dealt with using the national safeguarding policy and procedures in relation to the management of allegations and concerns.

I have read and understood the Code of Conduct and agree to abide by it.

Signature of Leader/Helper:	
Print name Leader/Helper:	
Date:	
Signature of Leader or Safeguarding Representative:	
Date	

For any queries relating to the information
contained in this guide please contact
safeguarding@dioceseofsalford.org.uk