

St Mark's Church, Parish of Armagh Safeguarding Trust



St Mark's Church Office 44 Victoria Street Armagh BT61 9DT

Dear Applicant Volunteer,

Thank you for your willingness to offer your assistance with our Parish's Ministry to Children and Young People. Your readiness to serve is deeply appreciated.

Please find attached the necessary documentation which must be completed to enable the consideration of your appointment as a leader or helper with a Parish Youth or Children's Organisation.

As you will see, the AccessNI Process requires you to follow some steps online. On receiving your 'Application Reference' number, could you please return the completed documents attached, along with the Identification sources required, to the Parish Office (during opening hours), or directly to myself at an opportune time. Please note that we shall have to forward photocopies of your Identification Documents to the Church of Ireland Board of Education as part of this process. These documents shall then be destroyed in compliance with GDPR policy. Guidance on the Safeguarding Trust Website may be helpful to you when completing your application:-https://safeguarding.ireland.anglican.org/access-ni/

As an outcome of your AccessNI application, you will receive a certificate either by email or by post, in accordance with your request during the application process. Upon receipt of your AccessNI Certificate, please allow me to view your Access NI Certificate, so that we can progress this process and inform you of the outcome of your application to serve, as quickly as possible.

Should you require any guidance or assistance concerning this process, please feel free to contact myself, or Caroline in our Parish Office.

Again, thank you!

Yours in Christ,

Malcolm Kingston

Telephone: 028 37523197 or 37522970 email: malcolm.kingston@btinternet.com

Parish of St Mark's Armagh

Volunteer Application Form CHILDREN AND YOUNG PEOPLE





TO BE COMPLETED BY THE APPLICANT

CONTACT DETAILS		
FULL NAME:	DATE OF BIRTH:	M/F:
ADDRESS:		
	POSTCODE:	
CONTACT No: CONTACT E-MAIL:		
PREVIOUS NAME (IF DIFFERENT TO ABOVE)?		
EXPERIENCE		
PLEASE HIGHLIGHT ANY EXPERIENCE OF WORKING WITH OVOLUNTARY CAPACITY. GIVE OUTLINE DATES IF POSSIBLE		IN A PAID OR
LEADERSHIP ROLE PLEASE OUTLINE THE GROUP(S) AND LEADERSHIP ROLE(S) YOU WOULD LIKE TO UNDERTAK	E AS A LEADER
WHY DO YOU WANT TO UNDERTAKE THIS ROLE(S)?		
OTHER INFORMATION PLEASE OUTLINE ANY OTHER INFORMATION RELEVANT TO	THIS ROLE (e.g. Medical conditions of	or allergies)

REFERENCES			
Please provide the names and addresses of two people who we	could contact for a reference (not relativ	es).	
(1) FIRST REFEREE	(2) SECOND REFEREE		
NAME:	NAME:		
ADDRESS:	ADDRESS:		
PHONE:	PHONE:		
E-MAIL:	E-MAIL:		
DECLARATIONS			
The Church has a policy on the recruitment of ex-offenders which request.	h is available from a member of the paris	sh panel on	l
Have you ever been convicted of a Criminal offence or been the	subject of a caution or bound over order	? YES	NO
If yes, please list below the nature and date(s) of the offence.			
NATURE OF OFFENCE:	DATE:		
I consent to AccessNI Vetting being undertaken for the role for w	which I have applied.	YES	NO
I confirm that nothing in my personal or professional background which involves working with children	I deems me unsuitable for a post,	YES	NO
I acknowledge that I have read sections 4-7 of Safeguarding Truthis policy in the role(s) I have applied for. (An up-to-date copy of https://www.ireland.anglican.org/about/safeguarding/)		YES	NO
I shall uphold the requirements of the role and exercise a duty to	care for any children in my charge.	YES	NO
General Data Protection Regulation (GDPR): We are committed to protecting your personal information. By completing and so holding and processing your personal data, including training for the purpose of activities. If you have any questions about how we process your personal date	contacting you by post, phone or electronically with		
NAME (print):			
TRAINING DECLARATION			
If you have not undertaken any Safeguarding Trust training please	se leave this section blank.		
I have attended training which has introduced me to the Church procedures to be followed when working with children have been		commende	d
DATE OF TRAINING:	VENUE:		
SIGNATURE:			

NEXT STEPS

Please return this form to a member of the Parish Panel, they will contact you to arrange an informal interview. With this application form you should have received an **AccessNI application pack**. Please complete the instructions on this in regard to AccessNI vetting and bring the form (and supporting document originals) to the interview.

Please note that a leadership role can only be undertaken once the Parish Panel have formally approved it.

Parish of St Mark's Armagh





NOTES:

REFERENCES:

- Furnish the applicant with an AccessNI application pack which can be found at https://safeguarding.ireland.anglican.org/access-ni/
- Interviews for AccessNI checks do not need to be done again if a volunteer has been vetted before for the parish and continued to work in parish activities. However, should you wish to do checks again for long-serving volunteers this is at your discretion and should take place in the context of a new interview.
- If a break of 6 months or more occurs in any volunteer's service, then a new interview and vetting process should be undertaken.

REFERENCE (1) RECEIVED: YES / NO	REFERENCE (2) RECEIVED YES / NO
REFERENCE (1) FOLLOWED UP: YES / NO	REFERENCE (2) FOLLOWED UP: YES / NO
APPLICATION FORM:	
DATE APPLICATION FORM RECEIVED:	FORM COMPLETE? YES / NO
PANEL INTERVIEW: (Or refresher interview if the volunteer has been	en in the role previously)
PANEL MEMBER (1)	PANEL MEMBER (2)
PANEL MEMBER (3)	DATE OF INTERVIEW:
RECOMMENDATION (circle): APPROVED /	NOT APPROVED / DEFERRED
NOTES:	

ACCESSNI VETTING: PLEASE COPY THE 10 DIGIT ACCESSNI REFERENCE NU	IMBER FROM THE APPLICANT'S VALIDATION FORM
CONFIRMATION THAT THE ORIGINALS OF IDENTITY DO (These should be as per the document guidance and named in the s A copy of the original identity documents should be taken, and sent applicant's original AccessNI application pack.	section below. Most applicants will only need 3 documents.
1:	2:
3:	4:(If necessary)
DATE: SIGNATURE	E(INCUMBENT):
VETTING CLEARANCE: Once the vetting process has taken place the applicant we may share with you online, or a physical certificate that the undertaking any work until this is received. Please note below the date of receiving the certificate. If contact the Church of Ireland Safeguarding Officer.	hey may show you in person. Volunteers should not be
DATE ACCESSNI VETTING DISCLOSURE RECEIVED:	DATE ON THE CERTIFICATE:
ANY INFORMATION TO DEBAR APPOINTMENT?	YES / NO
DECISION NOTIFIED (circle): APPOINTED	COMMENCEMENT IN ROLE (Date volunteer can start their work)
NOT APPOINTED	DATE:
TRAINING: (Safeguarding Trust training must be completed within 1	2 months of appointment)
TRAINING DATE:	VENUE:







ACCESSNI APPLICATION PACK

CONFIDENTIAL DECLARATION FORM

The Church of Ireland is very aware of the sensitive and confidential nature of the information contained in this document and we wish to assure you that it will be treated in the utmost confidence and handled securely according to the Data Protection Act 2018.

You have applied for a role, which is a Regulated Activity, as defined by the Safeguarding Vulnerable Groups (N.I.) Order 2007 and also falls within the definition of an "excepted" position as provided by the Rehabilitation of Offenders (Exceptions) Order (N.I.) 1979, therefore **ALL** convictions including **SPENT** convictions **MUST** be disclosed. Having a criminal record will not necessarily bar you from working or volunteering within the Church of Ireland. This will depend on the nature of the position and the circumstances and background of your offences. This information will be verified through an AccessNI **ENHANCED** Disclosure.

Contained within this pack is all the information that you will need to complete an AccessNI check. The Church of Ireland will facilitate this check. Please see below for details of how to complete this form. There are two parts to this process: online registration and completion of this pack. All applicable sections must be completed before your application can be processed.

Please refer to AccessNI Code of Practice found on: www.safeguarding.ireland.anglican.org/accessni

SECTION 1 outlines the online process required for AccessNI via the NI Direct website and includes the unique PIN number for the Church of Ireland.

SECTION 2 is where applicants fill out their details and give permission for the check to proceed. **All** forenames **MUST** be included at this point.

SECTION 3 should only be completed by an Incumbent or Panel Member.

SECTION 4 is the checklist of applicable ID.

Once the pack has been completed fully it should be returned by **post only** to:

AccessNI Administrator, Floor 2, 18-22 Hill Street, Belfast BT1 2LA

ALL sections should be returned, along with **COPIES** of ID used to verify the identity of the applicant.

Please do not send the pack and supporting ID documents separately.

Applications will not be accepted by email.

THIS PAGE DOES NOT NEED TO BE RETURNED







PIN NOTIFICATION AND ID VALIDATION FORM

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APPLICANT INSTRUCTIONS

- 1. Go to www.nidirect.gov.uk/apply-for-an-enhanced-check-through-a-registered-body
- Select the green button to apply for an <u>ENHANCED DISCLOSURE THROUGH A REGISTERED BODY</u>.
 Please note the Applicant <u>MUST</u> choose the <u>ENHANCED</u> check or the application will be rejected by the Church of Ireland.
- 3. Register your account by creating a user ID & password. To track your application, details of this need to be kept safe.
- 4. Once you have successfully logged in, you will be taken to the online application.
- 5. Enter the PIN number below at Step 1 of the form completion:
 9 1 8 0 6 6 This is the pin number for the Church of Ireland.
- 6. Please include your parish name, diocese or organisation in Organisation Reference.
- 7. Complete the remainder of the form and click **SUBMIT** to finish the online process.
- 8. Once completed please note the 10-digit AccessNI application reference number below.

 Application Reference
- 9. Sign and date Section 2 and give it to your Incumbent/Panel Member who will complete Sections 3 and 4 to verify your identity.
- 10. Return Sections 1,2, 3 and 4 of this pack to the person who asked you to complete the AccessNI application.







SECTION 2

IDENTITY VALIDATION

Surname										
<u>ALL</u> FORENAMES		T	T	1		T	ı	Τ	1	
Date of Birth DD / MM / YYYY			/			/				
Current Address										
						Postcoo	de			_
Phone Number										
Email Address										
ROLE DETAILS										
Role applied for										
Parish										
Diocese										
(Armagh, Clogher, Conn	or, Derry &	Raphoe,	Down & D	romore, Ki	lmore)					
Is this Role regulated	d activity	? (As de	fined by	AccessN	I)			Yes	N	lo.
Please refer to the gwww.safeguarding.i					our webs	ite:				
Is it a Paid Role?								Yes	N	lo
Is this Role working	with chil	dren?						Yes	N	lo
Is this Role working	with adu	Its at ris	k of harr	n / in ne	ed of pro	tection?	•	Yes	N	lo
*Paid Roles will requi An invoice will be sen						8 days.				







Please be aware that a criminal record will not necessarily prevent applicants from gaining a position. It is **your responsibility** to provide the certificate to your Incumbent/Panel Member.

The Disclosure and Barring Service maintains lists of individuals who are barred from engaging in Regulated Activity with children or with adults at risk of harm / in need of protection. All posts necessitating an AccessNI Enhanced Check include a check of the Barred Lists.

Have you ever been convicted, or received an official caution for a criminal offence, or have any prosecutions pending?

Yes

No

If yes, please give details of the offence. (Continue on a separate sheet if necessary)

Date of Conviction	Offence	Sentence

Have you ever been or are you the subject of an investigation due to concerns	Yes	No
about the treatment of children / adults at risk of harm / in need of protection?	163	INU

If yes, please give details below. (Continue on a separate sheet if necessary)

DATA PRIVACY STATEMENT

The data contained in this form will be held in line with the Data Protection Act 2018. We use the information on this form to process your vetting information in line with Regulations under Part 5 of the Police Act 1997 (as amended). The data on this form will be shared with AccessNI and held by the Board of Education for 90 days in accordance with AccessNI guidelines. AccessNI have a detailed privacy statement outlining how they store, process and share your data which you can read here https://justice-ni.gov.uk/publications/ani-privacy

If you wish to ask any questions in relation to data protection or wish to make a complaint you can contact the Church of Ireland's Data Protection Officer at dataprotection@rcbcoi.org or you can contact the Information Commissioner's Office via their website here www.ico.org.uk







DECLARATION

Please tick the boxes below to confirm that you have read and understood these statements.

I understand that my confidential documentation will be retained by the Church of Ireland Board of Education for 90 days after the certificate has been issued. After that period all documentation will be destroyed.

I understand that I will be undertaking regulated activity or a role which requires an Enhanced Disclosure Check and that a "Barred List Check" is required. I understand that it is a criminal offence to apply for an Enhanced Disclosure Check if I am on one of the barred lists. I give my consent to proceed with a Barred List Check.

I confirm that all the information I have provided is correct.

Applicant's signature						
Date DD/MM/YYYY	/		/			
SECTION 3						
FOR COMPLETION BY INC		-				
		-				
I confirm I have seen the original ID do		-				
I confirm I have seen the original ID do		-				
I confirm I have seen the original ID do Date of ID check DD / MM / YYYY		-				
I confirm I have seen the original ID do Date of ID check DD / MM / YYYY Signed (Rector, Curate or Panel Member)		-				







SECTION 4 - Should include 1 from Group 1 and 2 further documents from Groups 1, 2A or 2B. If Group 1 documentation is not available, 4 documents from Groups 2A or 2B must be provided.

GROUP 1: PRIMARY IDI	ENTITY DOCUMENTS
Current passport (any nationality)	Original birth certificate (UK, Isle of Man or Channe Islands) issued at time of birth
Biometric Residence Permit (UK)	Original long form Irish birth certificate issued at time of registration of birth (Ireland)
Current driving licence (UK, Ireland, Isle of Man, Channel Islands or any EEA country)	Adoption certificate (UK, Isle of Man or Channel Isla
GROUP 2A: TRUSTED GOV	ERNMENT DOCUMENTS
Birth certificate (UK, ROI, Isle of Man or Channel Islands) issued after time of birth	Electoral ID card (NI only)
Marriage / Civil Partnership Certificate (UK, Ireland, Isle of Man or Channel Islands)	Current driving licence photocard, full or provisiona (All countries outside the EEA)
HM Forces ID card (UK)	Current driving licence (full or provisional paper version (if issued before 1998) (UK, Isle of Man, Channel Islands, EEA)
Firearms licence (UK, Channel Islands and Isle of Man)	Immigration document, visa or work permit (issued a country outside the EEA - valid only if the applicar working in the country that issued the document)
GROUP 2B: LIVING AND SOC	IAL HISTORY DOCUMENTS
Mortgage Statement (UK, EEA)	Land and Property Services rates demand (NI only)
Financial statement, for example ISA, pension or endowment (UK)	Council tax statement (Great Britain, Channel Island
P45 or P60 statement (UK, Channel Islands)	
ABOVE DOCUMENTS MUST BE ISSUE	ED WITHIN THE LAST 12 MONTHS
Credit card statement (UK, EEA)	Bank or building society account opening confirmat letter (UK, EEA)
Bank or building society statement (UK, EEA)	Utility bill (not mobile phone) (UK, EEA)
Bank or building society statement (Outside EEA) (Branch must be in the country where the applicant lives and works)	Benefit statement, for example Child Benefit, Pension, etc (UK, Channel Islands)
Central or local government, government agency, or local co from the Department for Work and Pensions, the Employme	
ABOVE DOCUMENTS MUST BE ISSU	ED WITHIN THE LAST 3 MONTHS
EU National ID card	Cards carrying the PASS accreditation logo (UK, Isle of Man, Channel Islands)
60+ or Senior (65+) SmartPass issued by Translink (NI)	Letter from head teacher or further education colle principal (UK for 16 -19 year olds in full-time educat - only used in exceptional circumstances if other documents cannot be provided)
Public Services Card (Ireland)	Letter of sponsorship from future employment provi or voluntary organisation (non-UK or non-EEA only fo
yLink card issued by Translink (NI)	applicants residing outside UK at time of application)

ABOVE DOCUMENTS MUST BE VALID AT THE TIME OF CHECKING

This information should be retained in line with the General Data Protection Regulations and Safeguarding NI document available here: https://safeguarding.ireland.anglican.org/wp-content/uploads/2020/03/NI-Child-General-Data-Protection-Regulation-GDPR.pdf