# Dumfries and Galloway Advocacy Service

**CONFIDENTIAL**

**Application for the Post of Volunteer Independent Advocate** - Date of Issue: Date

Please complete this form in black ink and block letters or typescript and return it to the Chief Executive by email or alternatively by post.

The Application should be returned within 14 days of the date of issue.

# Personal Details

Title:Click here to enter title.

Forename(s):Click here to enter forename. Surname:Click here to enter surname.

Date of Birth: Click here to enter date. Gender: Click here to enter gender.

Permanent Address:

Click here to enter address.

Postcode:

Click here to enter postcode.

Home Telephone: Click here to enter number. Mobile Telephone: Click here to enter number.

E-mail: Click here to enter email.

# Right to Work in the U.K.

Only individuals who have the right to work in the U.K. are eligible for the post of Volunteer Independent Advocate. If there is any doubt regarding your status, we may need to check your details with other agencies.

**Are you eligible to work in the United Kingdom:** Yes  No

# Education, Training and Qualifications

Please list any relevant Qualifications achieved and/or training courses attended (please continue on an A4 sheet if required)

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| --- | --- | --- |
| **Year Obtained** | **Course Subject/Content** | **Qualifications** |
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Conflicts of Interest

Are you aware of any possible conflict of interest which might arise, should you be accepted as a volunteer Independent Advocate, in any connection with either individuals or organisations.

Yes  No

If YES please provide details:

Click or tap here to enter text.

# Background information – Below please tell us about any previous employment and any voluntary work undertaken which may support your application.

*Previous & current employment paid or unpaid information. (Please use a separate sheet if necessary)*

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| --- | --- | --- |
| Dates (From – To) | Employer Details | Duties / Responsibilities |
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**Why do you wish to become a volunteer Independent Advocate?**

(Please use a separate sheet if necessary)

Click here to enter text.

**Essential Criteria:**

Do you have access to a laptop or a computer? Yes  No

Do you have access to the Internet? Yes  No

Do you have a landline or mobile phone? Yes  No

If you feel you have a disability, are there any “Interview” arrangements we can make on your behalf? Please provide details below:

Click or tap here to enter details.

# Advertising

Please indicate below how you heard about this post:

Click or tap here to enter details.

# References

Please give the names and addresses of two persons to whom you are well known and who will provide a reference as to your suitability for the post of Volunteer Independent Advocate. These persons should not be a partner or related to you. Any reference provided will form part of your application.

**Reference 1**

Names: Click here to enter name.

Address: Click here to enter address.

Postcode:Click here to enter postcode.

Contact Number:Click here to enter number.

Email Address:Click here to enter email.

Occupation:Click here to enter occupation.

Relationship:Click here to enter details.

**Reference 2**

Names: Click here to enter name.

Address: Click here to enter address.

Postcode:Click here to enter postcode.

Contact Number:Click here to enter number.

Email Address:Click here to enter email.

Occupation:Click here to enter occupation.

Relationship:Click here to enter details.

# Criminal Convictions

All applicants for the post of Volunteer Independent Advocate will be registered with the Protection of Vulnerable Groups Scheme. The PVG will detail all previous convictions (and cautions) held on central records, both spent and unspent. It may also contain non-conviction information that a senior official deems relevant to record.

Please provide all information on criminal convictions regardless of where or when the offence was committed. This covers the following:

1. Offences committed outside Scotland or while in the armed forces.
2. Motoring offences (excluding parking offences).
3. Cautions.

**Have you ever been convicted of an offence?** (Tick one box) Yes  No

**Do you have a court case pending?** (Tick one box) Yes  No

If you have answered yes to either of the above, please provide details below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Court** | **Offence** | **Sentence/disposal** |
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**Are you currently registered with PVG?** (Tick one box) Yes  No

**If yes, what is your registration number?** Click here to enter registration number.

# Declaration

The General Data Protection Act (GDPR) requires the Dumfries and Galloway Advocacy Service to inform you that this form, when completed, will include information about you which can be designated “personal data” under the Act. We will process and may share the data for recruitment purposes only. As a “data subject” under the Act, you have a right to ask for a copy of any personal data held regarding you and to ask for any inaccuracies to be corrected.

To ensure that your application is processed, please sign and date the following statement.

I declare that the information provided is, to the best of my knowledge correct and comprehensive. I consent to it being used and verified for the purposes set out above. I understand that the provision of false or inaccurate information or withholding relevant information may result in my application being disqualified. I also consent to any subsequent information provided by PVG being used by the Dumfries and Galloway Advocacy Service for the purpose for which it is collected.

Name (print): Click here to enter name.

Signature: Click here to enter signature. Date: Click or tap to enter a date.

Please check that you have completed all sections of this form and return it to: [pamela.deans@dgadvocacy.co.uk](mailto:pamela.deans@dgadvocacy.co.uk) or alternatively by post to: Pamela Deans, Chief Executive, Dumfries and Galloway Advocacy Service, Hestan House, Crichton Business Park, Bankend Road, Dumfries, DG1 4TA.

If you have any queries concerning completion of this application form please contact Pamela Deans on 01387 247237.

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