



MTC Application Form

We ask all prospective workers with children to complete this form. If there is insufficient room to answer any question, please continue on a separate sheet. The information will be kept confidentially by Pathway, unless requested by an appropriate authority. On completion please return by post to : *The Team Leader, Pathway, Trinity Church Centre, 15 Nether St, London N12 7NN*, or email the form to: ashley@pathway.co.uk

I. PERSONAL DETAILS

Title (Mr/Mrs/Miss/Other) -----

Full Name:

Maiden/all former name(s):

Date of Birth: -----

Marital Status: -----

Nationality: -----

Address:

Town: -----

City / County: -----

Email:

Home Telephone No: -----

Mobile Telephone No: -----

How did you hear about Pathway?

How long have you lived at the above address?

-----Mths-----Yrs

If less than three years, please give previous address(es) with dates:

Previous Address 1:

Previous Address 2:

From: -----/-----/-----

From:

-----/-----/-----

Address: ----- Address:

Town: ----- Town:

City/County: ----- City/County:

Post Code: ----- Post Code:

2. CHRISTIAN LIFE & EXPERIENCE

Please tell us how and when you became a Christian.

Please tell us what you understand the term 'born again' to mean.

Please tell us why the Bible is important when working with children.

Which Church do you regularly attend?

Name & Address:

Minister/Pastor:

3. WORKING WITH CHILDREN

Please give details of previous experience of looking after or working with children and/or young people.

3. WORKING WITH CHILDREN (cont.)

Please tell us about any qualifications, training, skills or interests you may have which you think may be relevant or useful with possible schools work with Pathway.

Are you prepared to undertake training? YES NO (*Please tick*)

Have you ever had an offer to work with children or young people declined?
 YES NO (*Please tick*). If yes, please give details.

Do you suffer or have you suffered from any illness which may directly affect your work with children?

YES NO (*Please tick*). If yes, please give details.

REFERENCES

Referee 1 (*Vicar / Pastor / Church Leader*)

Name & Address:

Tel No: (Day) _____
(Eve) _____

Referee 2 (*Friend or Work Colleague*)

Name & Address:

Tel No: (Day) _____
(Eve) _____

DECLARATION

You will understand the great responsibility involved in working with children and young people, especially the need to ensure their safety. We therefore ask you to sign the following declaration.

A) Have you ever been charged with or convicted of a criminal offence, or are you at present the subject of criminal charges? (NB The disclosure of an offence may not prohibit your appointment).

YES NO *If YES, please give details (including the nature of the charge(s) and dates and, where applicable, the outcome of any investigation/Court Proceedings):*

.....

B) Have you ever been involved in Court proceedings concerning a child for whom you have parental responsibility?

YES NO *If YES please give details and dates:*

.....

C) Has there ever been any cause for concern regarding your conduct with children?

YES NO *If YES please give details and dates:*

.....

D) To your knowledge have you ever had any allegation made against you which has been reported to, and investigated by, Social Services and/or Police?

YES NO *If YES, please give details and dates, we will need to discuss this further with you.*

E) Pending appointment, do you consent to obtaining a formal CRB check? (As part of it's 'Child Protection Policy' all persons working with Pathway are required to obtain this.)

YES NO

Please either post or email two recent passport style photographs with your name and the date when the photograph was taken clearly written on the back or as the filename of the photo.

Signed:
Name (please print):
Date: