

Human Resources Department, Bath and North East Somerset District
Bath police station, Manvers Street, Bath BA1 1JN
Telephone: 01225 842546
E-mail: rachel.nash@avonandsomerset.police.uk

Dear Sir / Madam

Thank you for your interest in volunteering with the Avon and Somerset Constabulary.

Would you kindly complete the enclosed application form and health questionnaire (please place the health questionnaire with your application but in a separate envelope addressed to the Force Medical Officer. Mark the health questionnaire envelope with your name and the opportunity for which you are applying) and return them by the closing date specified on the advertisement to:

Rachel Nash, Human Resources Manager – Bath and North East Somerset District, Avon and Somerset Constabulary, Bath police station, Manvers Street, Bath BA1 1JN.

Please ensure that the location of the opportunity for which you are applying is clearly stated and full details of your qualifications and relevant experience are clearly illustrated. Volunteers are shortlisted by matching information contained in the application form to task related criteria and consequently we are unable to make assumptions about your experience.

Foreign nationality is not an automatic bar to volunteering or to granting vetting clearance. However, the Force Vetting Officer will require adequate residency and background checks to be conducted for a period of 3 years preceding the application in order to make an informed decision.

We are unable to pay excess postage on items received, would you therefore please ensure the correct amount is paid, otherwise your application will not be accepted.

If you have a disability, you may wish to let us know if there are any reasonable adjustments you would like us to make to assist you in your application. Please be assured that this information will be treated in the strictest confidence.

Yours sincerely

Rachel Nash
District Human Resources Manager

AVON AND SOMERSET CONSTABULARY VOLUNTEER APPLICATION FORM



The Avon and Somerset Constabulary have a Force vetting policy, which embraces the National Vetting Policy for the Police Community 2004, and the Home Office Guidelines 54/2003. This is to ensure the integrity of all volunteers, to maintain the security of the assets we hold, and to give confidence, and assurance to the general public.

All volunteers are required to complete this form in full and have a police check before they are accepted. Some of the information supplied on this form will be held on computer while you are a volunteer with Avon and Somerset Constabulary. It will be assumed by the constabulary that you have obtained the permission of the persons named in this application for checks to be conducted on them.

Please complete this form in blue/black ink and write as clearly as you can.

Delays will be caused where the information supplied is not clear, or questions are not answered fully.

1. Volunteer's Personal Details				
First name(s):				
Family Name: (Mr / Mrs / Miss / Ms)				
Previous Family Name/s:				
Town and Country of Birth				
Date of Birth:		Age:		
Nationality		Do you require a work permit?	YES	NO
Address: <i>House name/number Street, Town, County.</i>				
Post Code:		National Insurance Number (if known)		
Telephone Nos. – Daytime:		Evening:	Mobile:	
How long at this premises:	If you have resided at any other address(es) within the last 5 years, please supply Month & Year on a additional sheet.			
Email address@.....			
2. Opportunity applied for				
District:				
Police Station:				
Opportunity:				
First available start date:				
Day's available:				
Hour's available:				

6. Work Experience

Please give details of any paid or voluntary work experience relevant to opportunity for which you are applying:

Continue on a separate sheet if needed

7. Your Skills

Do you hold a current, clean driving licence?	YES	NO
Do you speak any languages other than English?	YES	NO
If YES please state which language/s		

Please give details of skills which you possess that you believe would be of use to the Police (e.g. computing, people skills, etc.)

8. References

Give the names and full contact details of 2 people (NOT relatives or close friends), whom you have known for at least TWO years, who are prepared to vouch for your character and recommend you.

	Reference 1	Reference 2
Name:		
Address:		
Post Code:		
Tel No:		
Mobile No:		
E-mail address:		
How do you know this person?		
How long have you known this person?		

9. Any other comments in support of your application

Personal Information for Vetting

We will want to know whether any of your close family or associates are involved in criminal activity and we must therefore search for any criminal convictions or cautions recorded against your family. **You must advise them that these enquiries will be made.** The police service cannot disclose the results of these enquiries to you.

Please tell us about your family (wherever they live) and any other adults living at your address.

Continue on a separate sheet if necessary.

Please complete all sections or your application will be delayed.

Relationship to you (delete as appropriate)	Full name (including previous names and name at birth if different)	Date and place of birth	Full address (including postcode if known)
Your spouse or partner			
Your father			
Your stepfather or mother's partner			
Your mother			
Your stepmother or father's partner			
Your brother or sister (full/half/step/etc)			
Your brother or sister (full/half/step/etc)			
Your brother or sister (full/half/step/etc)			
Your spouse's or partner's mother / stepmother			

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Relationship to you (delete as appropriate)	Full name (including previous names and name at birth if different)	Date and place of birth	Full address (including postcode if known)
Your spouse's or partner's father / stepfather			
Your child/child of partner (only if aged 16+)			
Your child/child of partner (only if aged 16+)			
Your child/child of partner (only if aged 16+)			
Other adults living at your address (e.g. lodger)			

Please complete your personal details below:

Name:

Reason for vetting: **Volunteers In Policing application**

Application reference:

Signature:

Date:

10. Declaration

I declare that I have read and understood the questions set out in the application.

I declare that the information I have given in this application is true to the best of my knowledge and belief.

I understand that it will be assumed by the police that I have informed the persons named in this application that their details have been submitted as part of my vetting process.

I understand that I may be required to see the Force Medical Advisor if this is considered necessary.

I am aware that this application to Volunteer is subject to a police record checks and I consent to such checks being performed on the details I have provided in this application. I understand that it may not be possible to disclose the reasons should my application be unsuccessful.

Signature of Applicant:..... **Date:**.....

The Avon and Somerset Constabulary have a vetting policy in compliance with the National Vetting Policy for the Police Community 2004.

Any infringement of an individuals rights under the Data Protection Act 1998 or Articles 8 & 14 of the Human Rights Act 1998 will only be that which is necessary and proportionate to conduct the vetting enquiries.

Data Protection Act 1998

Please note that the information supplied on this form may be held and that the enquiries made in processing this form may include reference to personal data held on police computer or manual files.

The Chief Constable retains the right to reject any application without giving a reason.

HEALTH QUESTIONNAIRE - VOLUNTEERS

The answers to these questions will enable the Force Medical Officer to make an assessment as whether you comply with the medical standards required for our Volunteers In Policing scheme. It is important that your answers are accurate and you do not withhold any information. Your medical details will only be assessed if you successfully complete all stages of the recruitment process. Do not be concerned if you find yourself answering 'Yes' to a lot of questions. This is not unusual and does not necessarily mean that you are unfit to join the VIP scheme. The Force Medical Officer will contact you if further details are needed and, if necessary, will ask for a report from your GP or Specialist. This form will be destroyed if you are unsuccessful in your application.

The completed form should be put into the envelope that has been provided marked 'FORCE MEDICAL OFFICER', sealed and returned with your application form.

TITLE (MR/MRS/MISS/MS /OTHER)	Forename(s)		
SURNAME		MALE/FEMALE	
DATE OF BIRTH		Age (years and months)	
Address (full postal address including postal code)			
Telephone:			
HEIGHT (IN BARE FEET)		WEIGHT (IN ORDINARY CLOTHING)	
feet/inches		Stones/lbs	
metres		Kgs	
FAMILY DOCTOR'S DETAILS			
NAME		TELEPHONE NUMBER	
Address (full postal address including postal code)			

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PLEASE TICK (YES/NO) AS APPROPRIATE		Yes	No
1	Have you ever suffered from or had treatment for any of the following:		
	a) Asthma, hayfever, bronchitis, chest disease?		
	b) Raised blood pressure or disease of the heart or circulation?		
	c) Recurrent indigestion, gastric or duodenal ulcer or inflammation of the bowel?		
	d) Defective hearing in either ear or recurrent ear infection or discharge?		
	e) Eye disease including squint?		
	f) Any form of blackout or fit including epilepsy; any recurring headaches including migraine or dizzy bouts?		
	g) Rupture, varicose veins or haemorrhoids?		
	h) Back or spinal trouble including slipped disc or neck problems or postural problems?		
	i) Any fracture, injury or physical deformity to joints or tendons?		
	j) Diabetes?		
	k) Any form of anxiety state, depression or mental illness?		
	Do you take any medication or drugs, prescribed or not (excluding those for birth control)?		
	Do you wear spectacles or contact lenses?		
	Are you currently under treatment by a doctor/specialist or awaiting a doctor/specialist appointment or admission to hospital?		
	Have you any other medical condition, disability or inherited disorder which restricts, or may do so in the foreseeable future, your performance in the opportunity for which you have applied?		
	How many days off work/school have you taken due to sick leave in the last two years? Days Details:		
	<u>If you have answered 'YES' to any of the above, please give details below</u>		
	* if insufficient space, please continue on additional sheet		
	<p>Declaration: To the best of my knowledge and belief the information I have given on this form is correct. I understand that false information, misleading information or failure to disclose information will nullify my application or may result in the termination of my Volunteer status with the force.</p> <p>I give permission for the Force Medical Officer to contact my general practitioner or any other doctor under whose care I have been during the past few years, if necessary.</p> <p>Signature of applicant</p>		
	<p><u>FOR OFFICIAL USE ONLY</u> FORCE MEDICAL OFFICER'S COMMENT</p> <p>Fit for the post applied for <input type="checkbox"/> Requires medical prior to appointment <input type="checkbox"/> Unfit for Post applied for <input type="checkbox"/></p> <p>Reason:</p> <p>Signature Date</p>		

EQUAL OPPORTUNITIES MONITORING FORM

The following questions are designed to help us monitor the effectiveness of our Equal Opportunities policy. The responses received will be used for no other purpose. (See paragraph 10 overleaf)

Could you please complete this form (in BLOCK CAPITALS) and return it with your application form. The information you give will not affect your application in any way.

Age

- 16-24
- 25-35
- 36-45
- 46-55
- Over 56

Sexual Orientation

- Bisexual
- Gay/ Lesbian
- Heterosexual
- Prefer not to say

Gender

- Male
- Female

Disability

- Yes
- No

Ethnic Origin

White

- British
- Irish
- Any other white back ground

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian Background

Chinese or other

- Chinese
- Any other (Please specify)

Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed background

Black or Black British

- Caribbean
- African
- Any other Black Background

Religious Belief/ Faith

- Buddhist
- Jewish
- Christian (state denomination if you wish)
- Muslim
- Hindu
- Sikh
- None
- Prefer not to say
- Other (Please state)

Vacancy

In order to monitor the effectiveness of our advertising please answer the following:

How did you hear about the vacancy?

- Friend/Relative
- Job Centre/Employment Agency
- Internet
- Newspaper (please indicate publication)
- Intranet
- Other (please give details)

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1. The Avon and Somerset Constabulary has adopted a policy of Equal Opportunities for all its volunteers. Our aim is to ensure that we treat everyone fairly. We are developing a range of policies, practices and procedures, together with an extensive training package involving all our staff that will help us to achieve this objective.
2. A very important aspect of achieving success in eliminating discriminatory practices is an ability by management to monitor the effectiveness of our Equal Opportunities policies. There is no other effective way of knowing the nature and extent of any inequalities that may exist.
3. The Sex Discrimination Act 1975 prohibits discrimination on the grounds of gender or marital status. The Race Relations Act 1976 prohibits discrimination on the grounds of race and The Disability Discrimination Act 1995 prohibits discrimination on grounds of disability.
4. The Disability Discrimination Act 1995 defines disability as a physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities. People who have a disability and people who have a disability, but no longer have one are covered by the Act.
5. The collecting and analysing of data relating to these areas enables the Avon and Somerset Constabulary, not only to pinpoint where action is needed, but also to see what effect that action taken has had.
6. To this end, it is our intention to obtain information on the marital status, sex, and disability and ethnic origin of ALL applicants, adding that data personnel records.
7. In this way we will be able to examine the distribution of employees across the organisation and the success rate of applications. We need to establish that our Equal Opportunities policies are working for ALL, regardless of sex, racial, national or ethnic origin, disability or marital status.
8. The ethnic monitoring classifications shown overleaf are those used in the 2001 census.
9. We are currently examining the provision of better access to all our police buildings in relation to persons suffering from a physical disability. It will be helpful for us to ascertain accurate information about any difficulties staff may be encountering. If you have encountered any difficulties concerning this, please complete the questions overleaf regarding disability and access.
10. This data will be treated in the strictest confidence and will be safeguarded by the Personnel Department. Volunteers may be absolutely assured that they have the right to access to the record to check that the 'self-classification' has been correctly recorded, or to have the record amended at any time if the individual considers it appropriate. Once the information provided has been collated the monitoring form will be destroyed.
11. If you have any difficulties or queries about any aspect of the monitoring form, please do not hesitate to contact the Human Resources Department.