



## APPLICATION FOR APPROVAL OF A CHAPERONE

"The Licensing Authority shall not approve a chaperone unless they are satisfied that she (he) is suitable and competent..."  
(Regulation 15(4), *The Children (Performances and Activities) (England) Regulations 2014*)

All information given in this application form will be treated in confidence, other than information relating to criminal offences. Please complete this form in type or block capitals.

|   |  |  |
|---|--|--|
| Title   | MR / MRS / MISS / MS / OTHER (delete as appropriate) |  |
| First Names   |  |  |
| Surname   |  |  |
| Date of Birth   |  |  |
| Address, inc. postcode                                |  |  |
| How long have you lived at this address?              |  |  |
| If less than 5 years please list previous address(es) |  |  |
| Telephone No  |  |  |
| Email Address   |  |  |

|   |          |
|---|----------|
| a) Have you ever been refused registration as a chaperone by another Local Authority?   | Yes / No |
| If so please give further details and confirm dates   |          |
| b) Do you consent for Solihull MBC to share your information under GDPR regulations with other organisations/ local authorities who may require information about your application and/or registration? | Yes / No |
| If you answer no to question b), please be aware we might not be able to proceed with your application  |          |

|  |
|--|
| Please give details of any relevant work experience e.g., teaching, social work, youth work, child minding, nanny, play groups, nursery nurse, or if you have acted in a voluntary capacity such as Clubs/Brownies.<br>Please also add anything else that you would wish to add in support of this application. You may continue on another sheet if required. |
|--|

### References

Please provide details of two responsible persons who will be prepared to give you references as to your suitability to be a chaperone. References should be from separate sources and not from the same organisation or employer. At least one of these should know you in a professional capacity. Please state in what capacity the person is known to you. You must have known them for **at least two years** and they must not be from a spouse, partner or family relation or from someone with whom you live.

|                                      |                            |  |  |
|--------------------------------------|----------------------------|--|--|
| Reference 1 – Current/ last employer |                            |  |  |
| Referee name                         |                            |  |  |
| Company Name                         |                            |  |  |
| Company address                      |                            |  |  |
| Position held                        | Type of work               |  |  |
| Date started                         | Date ended (if applicable) |  |  |
| Email:                               | Tel no.                    |  |  |

|                                      |         |  |  |
|--------------------------------------|---------|--|--|
| Reference 2:                         |         |  |  |
| Name:                                |         |  |  |
| Address:                             |         |  |  |
| Email:                               | Tel no. |  |  |
| Capacity known to you                |         |  |  |
| How long have you known the referee? |         |  |  |

#### NSPCC Protecting Children in Entertainment Training

As part of the chaperone application process, you will be required to complete both the **Roles and Responsibilities of a Chaperone face to face training** (information for this session will be provided once we receive your application) and the **Online NSPCC Protecting Children in Entertainment Training for Chaperones**.

**Please ensure you complete the NSPCC Protecting Children in Entertainment Online Training before attending the Roles & Responsibilities face to face session. You will not be able to attend the Roles and Responsibilities of a Chaperone training if the NSPCC online training is not complete.**

You can access the course using the link below:

<https://learning.nspcc.org.uk/training/protecting-children-entertainment-chaperone-training>

Please be aware there is a £25 cost to complete this course. Please send your certificate for this training to us along with your application form.

#### Criminal Offences

Due to the nature of the work, we need to know if you have ever been convicted of a criminal offence, (including any traffic offences) or had an allegation made against you or been the subject of a child protection case conference. Please tick the appropriate box and provide relevant details.

|  |  |   |  |
|--|--|---|--|
| I have not been convicted of any offences.         |  | I have not had an allegation made against me or been the subject of a child protection case conference.         |  |
| I have been convicted of the offences shown below. |  | I have had an allegation made against me/been the subject of a child protection case conference as noted below. |  |

| Date | Court/ Authority | Offence/ Allegation | Outcome |
|------|------------------|---------------------|---------|
|      |                  |                     |         |
|      |                  |                     |         |

## DECLARATION AND CONSENT TO SHARE INFORMATION

I hereby declare that the above information is true, to the best of my knowledge. I understand that I would be liable for prosecution if I have wilfully stated in it anything, which I know to be false or do not believe to be true.

I give permission to disclose my name as a registered chaperone to other local authorities, schools, production companies and parents when we send a copy of a child performance licence.

If I move to another Borough I will notify Solihull MBC immediately and return the chaperone licence. I am aware that my licence will no longer be valid and I will need to apply to the new local authority.

I give my consent for the Child Employment Team to contact relevant agencies to validate the information on this application.

Applicant Signature

Date

**This form must be sent on an email with all below:**

Completed Chaperone application form

Headshot photo for use on Chaperone ID badge

NSPCC training certificate

You can email your application to: [childlicensing@solihull.gov.uk](mailto:childlicensing@solihull.gov.uk)

Please also forward your NSPCC training certificate and a headshot style photo of yourself with this application to be used on your Chaperone ID badge.

**Or by post to: Education Participation Advisory Service – EPAS**

Child Employment and Licensing Team  
Solihull MBC  
Manor Square  
Solihull  
B91 3QB

**Or by hand to:** Solihull Connect Centres

Further information can be found on our webpage:

<https://www.solihull.gov.uk/Business/Child-employment-and-performance>

The Child Employment and Licensing Team can be contacted by:

Email: [Childlicensing@solihull.gov.uk](mailto:Childlicensing@solihull.gov.uk)

Tel: 0121 704 6171

CHILDREN AND YOUNG PERSONS ACT 1963

CHILDREN (PERFORMANCE) REGULATIONS 1968

CHILDREN (PROTECTION AT WORK) REGULATIONS 1998

CHILDREN (PERFORMANCES) (MISCELLANEOUS AMENDMENTS) REGULATIONS 1998

The Children (Performances and Activities) (England) Regulations 2014 ([legislation.gov.uk](http://legislation.gov.uk))