WANT TO CHANGE CHANGE? YOUR ROLE?

Change of Role (CR) Form (England and Wales)



scouts.org.uk/appointment

Personal details	Telephone (daytime)
Membership No.	Telephone <i>(home)</i>
	receptore (none)
Date of birth Gender (M/F)	Mobile
D D M M Y Y	Mobile
Title	
Title	I am a UK taxpayer and would like The Scout Association to treat
	all donations that I have made in the past six years and all future donations that I make from the date of this declaration as Gift
Forenames	Aid donations.*
	*You must pay an amount of Income Tax and/or Capital Gains Tax for each tax
Surname	year (6 April one year to 5 April the next) that is at least equal to the amount of tax that The Scout Association will reclaim on your gifts for that tax year.
	Vermon
Known as	Your role
	Role applied for
Honours	
	Membership type:*
Occupation type	* Note: each role has a minimum membership requirement. If you are unsure of the minimum membership requirement for your role, please check with
	your line manager.
Occupation detail	Member Associate Non Member
	Group
Special needs/disability (attach additional information if appropriate)	District
	County/Area
	Anticipated start date
	Date of first review of appointment
Faith/religion	(if required for the role)
Current home address	Role information
Address	Please state whether you are changing roles or taking on an
	additional role.
	Change of role Additional role
Town	If change of role, please state role(s) to be cancelled and end dates
County	
UK postcode	
Country	
Email	

References

Please complete this section if your role requires references and if you are not known in your locality. If you are unsure, please ask your line manager. The referees shown below should preferably have knowledge of your work or contact with young people and/or should be able to comment on your character and relationships with others. At least one of the referees should have known you for at least five years and one of the referees must not be from Scouting. Referees must not be relatives. Examples of referees include your employer, college tutor, etc.

Reference 1: Name (including title)	Reference 2: Name (including title)
Address	Address
Postcode	Postcode
Telephone (daytime)	Telephone (daytime)
Telephone (home)	Telephone (home)
Mobile	Mobile
Email address	Email address
Relationship to applicant	Relationship to applicant
Length of time known by applicant	Length of time known by applicant

Applicant declaration

Please note, by signing this form you will, as appropriate, accept, confirm and declare all the matters under this section. If you do not agree with any one of the items below, please do not sign this form. For advice, please contact your line manager or the Scout Information Centre (0845 300 1818 or info.centre@scouts.org.uk).

1. Acceptance of Scouting values and Association rules By signing this application, I confirm that I:

- a) accept the values of Scouting as set out in the Purpose and Principles (please see the key policies card);
- b) have received a copy of Young People First Child Protection Code of Good Practice (known as the 'yellow card') and accept and understand that the aim of the Child Protection Policy is to safeguard the welfare of all Members by protecting them from neglect and from physical, sexual and emotional harm;
- c) am prepared to make the Scout Promise (where appropriate if you are unsure please contact your line manager or the Scout Information Centre);
- d) agree not to promote any beliefs, behaviours or practices that are not compatible with the values of Scouting;
- e) agree to work within the policies and rules of the Association (please see the key policies card);
- f) accept that Scouting is a uniformed organisation;
- g) accept the requirement to undertake the appropriate learning and/ or training within the timescale as laid down by the Association;

- h) understand that because my volunteering for the Association may involve substantial contact with persons under the age of 18, any conviction, which would be regarded as 'spent' for other purposes, must be disclosed and I hereby declare that I have not at any time, within the United Kingdom and its dependencies, or in any other Country or Territory, been found guilty by a court of any offence concerning children or young people under 18 years of age nor bound over, placed on probation, cautioned, or discharged conditionally or absolutely in relation to such offences;
- i) am not included on the Children's Barred List established by the Safeguarding Vulnerable Groups Act 2006 and the Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 or the Children's Barred List established by the Protecting Vulnerable Groups (Scotland) Act 2007. Individuals on these lists are disqualified from taking on a role in Scouting. For more information please contact the Scout Information Centre at Gilwell Park; and
- j) have not been convicted of any other offence(s) or subject to disciplinary proceedings relevant to the role I am undertaking in Scouting.

2. Data Protection

As a registered Data Controller, the Association is committed to the Data Principles of the Data Protection Act 1998.

By signing this application, I agree to the Association during and beyond my membership:

a) retaining my personal data to facilitate any present or potential future involvement with Scouting;

b) retaining sensitive personal data regarding my religion, special To be completed by sponsoring authority (if applicable) needs/disabilities and/or commission of offences or alleged offences; and Sponsoring authority c) carrying out checks into my suitability to carry out a role in Scouting, including obtaining references and Criminal Records checks. Name 3. Charity Trustee declarations Signature Note: this declaration only applies to you if your role requires you to be a Charity Trustee. This includes: Chairman, Secretaries and Treasurers of Executive Committees Date County Commissioners, County Scout Network Commissioners District Commissioners, District Explorer Scout Commissioners Group Scout Leaders, Assistant Group Scout Leader Section Leaders (but not Assistant Section Leaders) To be completed by relevant commissioner Nominated, Elected and Co-opted Members of Executive Committees. The below should be signed by the relevant commissioner or body: Name By signing this form, I declare that I: a) have not been convicted at any time of any offence involving Signature deception or dishonesty (please note, you do not have to declare any conviction here which is regarded as 'spent'); and b) am not an un-discharged bankrupt; and Date c) am not disqualified from being a Company Director; and M M d) have not failed to make payments under County Court Administration Orders; and For administration purposes only e) have not at any time been removed by the Charity Commission or by the court in England or Wales from being a Trustee due to Name: **Date** misconduct. Role: I confirm that I have read, understood and agreed to all the information provided in this form and also in all the Record updated with new role additional documents referred to. I further confirm that the information that I have provided in support of this application is complete and true to the best of my knowledge and belief. Form RF sent to referees (if required) Name of applicant Training Manager notified Initial HQ check satisfactory Signature References returned satisfactory (if required) Approval meeting arranged (if required) Date Approval from the approval meeting M M (if required) Approval from sponsoring authority To be completed by line manager only (if relevant) Approval from the relevant commissioner/ I have read a copy of Guide for Managers and am happy to support body the adult named above through the appointment process and will ensure that a relevant induction takes place. Record updated with above information Name Getting Started completed Signature Record updated with above information Appointment certificate received and issued

Date

M M Y